

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 09, 2006
Secretary of State**

DOCUMENT# 756261

Entity Name: DELRAY CLUB, INC.

Current Principal Place of Business:

2001 S OCEAN BLVD
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

2001 S OCEAN BLVD
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 59-2075875 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLY, TIMOTHY J.
2001 SOUTH OCEAN BOULEVARD
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCCALLION, VICTORIA
Address: 1556 ESTUARY TRAIL
City-St-Zip: DELRAY BEACH, FL 33483

Title: VP () Delete
Name: WELLS, JAMES R
Address: 4473 SANDERLING CIRCLE EAST
City-St-Zip: BOYNTON BEACH, FL 33436

Title: S () Delete
Name: CRAIG, CAROL
Address: 355 SW 29TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33445

Title: VP () Delete
Name: HADEED, VICTOR
Address: 2001 S OCEAN BLVD
City-St-Zip: DELRAY BEACH, FL 33483

Title: T () Delete
Name: GENDRON, EDWARD
Address: 10667 LIMEBERRY DRIVE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D () Delete
Name: LOGAN, MICHAEL
Address: 2000 S OCEAN BLVD#108
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY J. KELLY

RA

01/09/2006

Electronic Signature of Signing Officer or Director

Date