

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 765998

**FILED**  
**Mar 04, 2011**  
**Secretary of State**

**Entity Name:** BOCA DELRAY ASSOCIATION, INC.

**Current Principal Place of Business:**

5483 BOCA DELRAY BLVD.  
DELRAY BEACH, FL 33484

**New Principal Place of Business:**

**Current Mailing Address:**

5483 BOCA DELRAY BLVD.  
DELRAY BEACH, FL 33484

**New Mailing Address:**

**FEI Number:** 59-2242102

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ST. JOHN, CORE & LEMME, P.A.  
1601 FORUM PLACE  
STE 701  
WEST PALM BEACH, FL 33401 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  
**Name:** BROWN, KEN  
**Address:** 5483 BOCA DELRAY BLVD.  
**City-St-Zip:** DELRAY BEACH, FL 33484

**Title:** V  
**Name:** LEVINE, ERWIN  
**Address:** 5483 BOCA DELRAY BLVD.  
**City-St-Zip:** DELRAY BEACH, FL 33484

**Title:** S  
**Name:** DREEZER, RAY  
**Address:** 5483 BOCA DELRAY BLVD.  
**City-St-Zip:** DELRAY BEACH, FL 33484

**Title:** T  
**Name:** GOODMAN, DAVID  
**Address:** 5483 BOCA DELRAY BLVD.  
**City-St-Zip:** DELRAY BEACH, FL 33484

**Title:** D  
**Name:** ROBIN, BERNARD  
**Address:** 5483 BOCA DELRAY BLVD  
**City-St-Zip:** DELRAY BEACH, FL

**Title:** D  
**Name:** KLINE, JULIAN  
**Address:** 5483 BOCA DELRAY BLVD  
**City-St-Zip:** DELRAY BEACH, FL 33484

I hereby 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 all other like empowered.

**SIGNATURE:** DAVID GOODMAN

T

03/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date