


FILED
May 17, 2004 8:00 am
Secretary of State

04-30-2004 90078 033 ****50.00

**2004 LIMITED LIABILITY COMPANY
 ANNUAL REPORT**

DOCUMENT # L99000001239

1. Entity Name
 DELRAY ESTUARY, L.C.



Principal Place of Business
 666 SOUTH MILITARY TRAIL
 DEERFIELD BEACH, FL 33442

Mailing Address
 666 SOUTH MILITARY TRAIL
 DEERFIELD BEACH, FL 33442

DO NOT WRITE IN THIS SPACE

34006354



04152004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-0921448	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORP CO, INC.
 2699 SOUTH BAYSHORE DRIVE, 7TH FLOOR
 MIAMI, FL 33133

*George Coren
 666 South Military Trail
 Deerfield Beach, FL*

**DO NOT WRITE
 IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *George J. Coren* DATE *4/22/04*

Signature, typed or printed name of registered agent and fee (if applicable) (Not E-Registered Agent signature required when re-registering)

Filing Fee is \$50.00
 Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	PORTEN, SCOTT
STREET ADDRESS	666 SOUTH MILITARY TRAIL
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442
TITLE	V
NAME	COREN, GEORGE J
STREET ADDRESS	666 SOUTH MILITARY TRAIL
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442
TITLE	MGR
NAME	Nanci Porten
STREET ADDRESS	666 S. Military Trail
CITY-ST-ZIP	Deerfield Bch, FL 33442
TITLE	MGR
NAME	Stephen L. Porten
STREET ADDRESS	666 S. Military Trail
CITY-ST-ZIP	Deerfield Bch, FL 33442
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
 IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(I), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *George J. Coren* VP DATE *4/26/04* DAYTIME PHONE # *954-4221883*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE