## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N00000007351

FILED Mar 25, 2009 Secretary of State

Entity Name: THE COURTYARDS OF DELRAY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

72 SE 6TH AVE ASSOCIATED PROPERTY MANAGEMENT DELRAY BEACH, FL 33483

1928 LAKE WORTH RD. LAKE WORTH, FL 33461

**Current Mailing Address:** New Mailing Address:

ASSOCIATED PROPERTY MGMT ASSOCIATED PROPERTY MANAGEMENT

1928 LAKE WORTH RD 1928 LAKE WORTH RD. LAKE WORTH, FL 33461 US LAKE WORTH, FL 33461

FEI Number: 65-1054054 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KRIVOK, JAMES N ESQ DICKER, KRIVOK AND STOLOFF, PA 1818 AUSTRALIAN AVE S STE 400 WEST PALM BEACH, FL 33409 US

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:**

# ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete ENRICO, CORE VIII ENRICO, CORE P Name: Name: Address:

65 SE 5TH AVE. #O Address: 65 SE 5TH AVE. #O City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip: DELRAY BEACH, FL 33483

Title: VD Title: (X) Change ( ) Addition ( ) Delete SAMRA, TORY Name: SAMRA, ANTONIO V Name:

Address: 65 SE 5TH AVE. #A Address: 65 SE 5TH AVE. #A City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip: DELRAY BEACH, FL 33483

Title: () Delete Title: (X) Change ( ) Addition SHEHAN, THERESA SPAGNA, DICK S Name: Name:

72 SE 6TH AVE #L 3179 HOLMES RUN RD Address: Address: City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip: FALLS CHURCH, VA 22042

Title: () Delete Title: (X) Change ( ) Addition

Name: FAZZIO, MILLIE Name: SHEHAN, THERESE T Address: 65 SE 5TH AVE. #L Address: 72 SE 6TH AVE #L City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip: DELRAY BEACH, FL 33483

Title: () Delete Title: ( ) Change (X) Addition

FAZZIO, MILDRED D Name: Name: 65 SE 5TH AVE #L Address: Address: DELRAY BEACH, FL 33483 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JOHN MATH, APM **AGT** 03/25/2009