## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000004115

Entity Name: DELRAY HOUSING GROUP, INC.

FILED Mar 03, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 600 N. CONGRESS AVENUE, 310B DELRAY BEACH, FL 33445 **Current Mailing Address: New Mailing Address:** 600 NORTH CONGRESS AVENUE 600 N. CONGRESS AVENUE 310B STE. 310B DELRAY BEACH, FL 33445 DELRAY BEACH, FL 33445 US FEI Number: 03-0526635 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: ELLINGTON, DOROTHY 600 N. CONGRESS AVENUE 310B DELRAY BEACH, FL 33445 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: () Change () Addition () Delete ELLINGTON, DOROTHY PRES. Name: Name: 600 N. CONGRESS AVENUE, SUITE 310B Address: Address: City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete BERNADEL, JOSEPH Name: RANDOLPH, ANGELA Name: Address: 290 CLINTMORE ROAD, #158 Address: 8787 PIONEER ROAD City-St-Zip: BOCA RATON, FL 33496 City-St-Zip: WEST PALM, FL 33411 Title: () Delete Title: () Change () Addition SILVER, CHRISTEL Name: Name: 278 EAST CORAL TRACE CIRCLE Address: Address: City-St-Zip: DELRAY BEACH, FL 33435 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: MORRIS, SYLVIA Name: 414 NORTHEAST 12TH AVENUE Address: Address: City-St-Zip: BOYNTON BEACH, FL 33435 City-St-Zip: Title: () Delete Title: () Change () Addition SHUTT, THUY Name: Name: 102 NORTHEAST 12TH STREET Address: Address: City-St-Zip: DELRAY BEACH,, FL 33444 City-St-Zip: Title: ( ) Delete Title: () Change () Addition WEINMAN, MORRIS Name: Name: 13850 VIA TIVOLI Address: Address: DELRAY BEACH, FL 33446 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: DOROTHY ELLINGTON PRES 03/03/2009