

# **2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N11609

**FILED**  
**Mar 13, 2014**  
**Secretary of State**

**Entity Name:** THE VILLAS OF BOCA DELRAY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5483 BOCA DELRAY BLVD.  
DELRAY BCH., FL 33484

**New Principal Place of Business:**

**Current Mailing Address:**

5483 BOCA DELRAY BLVD.  
DELRAY BCH., FL 33484

**New Mailing Address:**

**FEI Number:** 59-2622440

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RICH, LYNDA MILLER  
5483 BOCA DELRAY BLVD  
DELRAY BEACH, FL 33484 US

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

GOODMAN, DAVID PD  
5483 BOCA DELRAY BLVD  
DELRAY BEACH, FL 33484 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: DAVID GOODMAN

03/13/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: RICH, HARRY  
Address: 5483 BOCA DELRAY BLVD.  
City-St-Zip: DELRAY BCH., FL US

Title: D  
Name: LLINK, DANIEL  
Address: 5483 BOCA DELRAY BLVD  
City-St-Zip: DELRAY BEACH, FL 33484 US

Title: TD  
Name: CHMARA, SIMON  
Address: 5843 BOCA DELRAY BLVD  
City-St-Zip: DELRAY BEACH, FL 33484 US

Title: SD  
Name: NADLER, MARTIN  
Address: 5483 BOCA DELRAY BLVD  
City-St-Zip: DELRAY BEACH, FL 33484 US

Title: PD  
Name: GOODMAN, DAVID  
Address: 5483 BOCA DELRAY BLVD  
City-St-Zip: DELRAY BEACH, FL 33484 US

Title: D  
Name: FRAN, MAYER  
Address: 5483 BOCA DELRAY BLVD  
City-St-Zip: DELRAY BEACH, FL 33484 US

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

PD

03/13/2014

Electronic Signature of Signing Officer or Director

Date