

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11645

FILED
Jan 26, 2009
Secretary of State

Entity Name: BOCA DELRAY III 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: 59-2622431

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUBLIN, BEN
5020 GOLFVIEW CT #1422
DELRAY BEACH, FL 33484 US

Name and Address of New Registered Agent:

LESCHER, NATHAN
5086 GOLFVIEW CT #1626
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: NATHAN LESCHER

01/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KERBEL, SEYMOUR
Address: 5152 GOLFVIEW CT #1815
City-St-Zip: DELRAY BEACH, FL 33484

Title: P () Delete
Name: WARD, SOI
Address: 5152 GOLFVIEW CT #1821
City-St-Zip: DELRAY BEACH, FL 33484

Title: DVPT () Delete
Name: KUBLIN, BENNETT
Address: 5020 GOLFVIEW CT., #1422
City-St-Zip: DELRAY BEACH, FL 33484

Title: DS () Delete
Name: RUTTENBERG, ROBERT
Address: 5054 GOLFVIEW CT # 1524
City-St-Zip: DELRAY BEACH, FL 33484

Title: VP () Delete
Name: MARCH, SEYMOUR
Address: 5086 GOLFVIEW CT # 1623
City-St-Zip: DELRAY BEACH, FL 33484

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MANN, GARY
Address: 5086 GOLFVIEW CT #1614
City-St-Zip: DELRAY BEACH, FL 33484

Title: T (X) Change () Addition
Name: LESCHER, NATHAN
Address: 5086 GOLFVIEW CT # 1626
City-St-Zip: DELRAY BEACH, FL 33484

Title: P (X) Change () Addition
Name: RUTTENBERG, ROBERT
Address: 5054 GOLFVIEW CT # 1524
City-St-Zip: DELRAY BEACH, FL 33484

Title: () Change () Addition
Name:
Address:
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: NATHAN LESCHER

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01/26/2009

Electronic Signature of Signing Officer or Director

Date