

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12747

FILED  
Mar 22, 2011  
Secretary of State

**Entity Name:** DELRAY PARK OF COMMERCE OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1255 NW 17TH AVE  
SUITE #1  
DELRAY BCH., FL 33445 US

**New Principal Place of Business:**

1255 NW 17TH AVE #1  
SUITE #1  
DELRAY BCH., FL 33445 US

**Current Mailing Address:**

1255 NW 17TH AVE  
SUITE #1  
DELRAY BCH., FL 33445 US

**New Mailing Address:**

1255 NW 17TH AVE #1  
SUITE #1  
DELRAY BCH., FL 33445 US

**FEI Number:** 58-1775633

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ATLANTIC CIRCLE  
1255 NW 17TH AVE  
SUITE #1  
DELRAY BEACH, FL 33445 US

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

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:**

Title: PSD  
Name: PAKRADOONI, MICHAEL J  
Address: 1255 NW 17TH AVE SUITE #1  
City-St-Zip: DELRAY BEACH, FL 33445

Title: VPTD  
Name: MACKEY, DAVID III  
Address: 1499 SW 10TH AVE SUITE #16  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D  
Name: POLERA, TONY  
Address: 900 NW 17TH AVE  
City-St-Zip: DELRAY BEACH, FL 33445

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: J. MICHAEL PAKRADOONI

PRES

03/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date