2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2005
Secretary of State

DOCUMENT# N13409

Entity Name: CASA DEL REY AT VILLA DELRAY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2641 EAST ATLANTIC BLVD
SUITE 310
POMPANO BEACH, FL 33062 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 802
POMPANO BEACH, FL 33061 US

New Mailing Address:

FEI Number: 59-2677026 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TMG MANAGEMENT
2641 EAST ATLANTIC BLVD
SUITE 310
POMPANO BEACH, FL 33062 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:	T	( ) Delete
Name:	BUDD, MARILYN	
Address:	5241 BOLERO CIRCLE	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:	D	( ) Delete
Name:	GARCIA, ALYSSIA	
Address:	5187 CORTEZ CT.	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:	VP	( ) Delete
Name:	BOVINETT, ROBERT	
Address:	5265 BOLERO CIR.	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:	P	( ) Delete
Name:	JO ANN, MINOR	
Address:	5210 CORTEZ CT.	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:	CS	( ) Delete
Name:	SCHULZ, DAWN	
Address:	5146 CORTEZ COURT	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:	D	( ) Delete
Name:	CLYNE, ALLISON	
Address:	5213 MAGELLAN WAY EAST	
City-St-Zip:	DELRAY BEACH, FL 33484	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TERRY MCGREGOR MR 02/11/2005

Electronic Signature of Signing Officer or Director — Date