

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N50642

**FILED**  
**Jan 10, 2010**  
**Secretary of State**

**Entity Name:** DBO ACRES PLAT NO. 2 ASSOCIATION, INC.

**Current Principal Place of Business:**

1036 BUCIDA ROAD  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

1036 BUCIDA ROAD  
DELRAY BEACH, FL 33483

**New Mailing Address:**

**FEI Number:** 65-0496264

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURNS, DANIEL E  
1036 BUCIDA ROAD  
DELRAY BEACH, FL 33483 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:** DCEO  
**Name:** BURNS, DANIEL E  
**Address:** 1036 BUCIDA RD  
**City-St-Zip:** DELRAY BEACH, FL 33483

**Title:** SD  
**Name:** SICILIANO, MICHAEL J.  
**Address:** 1860 FLAGLER ESTATES DRIVE, BREAKERS WEST  
**City-St-Zip:** WEST PALM BEACH, FL 33411

**Title:** PTD  
**Name:** BURNS, MICHELE  
**Address:** 1036 BUCIDA RD  
**City-St-Zip:** DELRAY BEACH, FL 33483

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:** MICHELE BURNS

PTD

01/10/2010

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

\_\_\_\_\_  
Date