

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 26, 1999 8:00 am  
Secretary of State

04-26-1999 90034 005 \*\*\*\*61.25

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1. Corporation Name

DELRAY CENTRAL HOUSE GROUP, INC.

Principal Place of Business

3667 S FEDERAL HWY  
GULFSTREAM MALL  
BONYTON BEACH FL 33483  
US

Mailing Address

P.O. BOX 2171  
DELRAY BEACH FL 33444  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

11/08/1996

4. FEI Number

65-0708528

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution



\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

VONDER LANCKEN, FRANK  
525 NW 7TH CT  
BOYNTON BEACH FL 33426

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD ☐ DELETE

NAME VONDER LANCKEN, FRANK

STREET ADDRESS 525 NW 7TH CT

CITY-ST-ZIP BOYNTON BEACH FL 33426

TITLE TD ☐ DELETE

NAME DAY, PAMELA

STREET ADDRESS 3768 EDGAR AVE

CITY-ST-ZIP BOYNTON BEACH FL 33436

TITLE CD ☐ DELETE

NAME PENNO, RAYMOND

STREET ADDRESS 108 SE 31 AVE

CITY-ST-ZIP BOYNTON BEACH FL 33435

TITLE CD ☐ DELETE

NAME GRANDIN, DUKE

STREET ADDRESS 2671 SE 28 CIR., BOX #53B

CITY-ST-ZIP BOYNTON BEACH FL 33435

TITLE SD ☐ DELETE

NAME FITZSIMMONS, MAUREEN

STREET ADDRESS 2861 S SEACREST BLVD., APT. 68

CITY-ST-ZIP BOYNTON BEACH FL 33435

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

CD

DAVID KNIGHT

714 A S. ARNOLD AVE

LANTANA, FL 33462

TD

Linda Bryan-Avallone

4493 N. Ocean Blvd

Delray Beach, FL 33483

Raffaele Imbimbo

134 SW 18th Ave

Boynton Beach FL 33435

MIKE THOMPSON

719 SOUTH LAKE AV.

DELRAY BCH. FL 33483

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037-11/98