

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006433

FILED  
Mar 20, 2012  
Secretary of State

**Entity Name:** DELRAY BEACH LODGE #2719, INC.

**Current Principal Place of Business:**

1180D SOUTH CIRCLE DRIVE  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

**Current Mailing Address:**

1180D SOUTH CIRCLE DRIVE  
DELRAY BEACH, FL 33445

**New Mailing Address:**

**FEI Number:** 65-0959616

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DENTE, JOSEPH PRES.  
1180D SOUTH CIRCLE DRIVE  
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:** PD  
**Name:** DENTE, JOSEPH  
**Address:** 1180D SOUTH CIRCLE DRIVE  
**City-St-Zip:** DELRAY BEACH, FL 33445

**Title:** S  
**Name:** CASTRACAN, TERESA A SEC  
**Address:** 5100 LAS VERDES CIRCLE  
**City-St-Zip:** DELRAY BEACH, FL 33484

**Title:** T  
**Name:** ALBANO, I, MARK TRES  
**Address:** 7264 HOLLINGTON PLACE  
**City-St-Zip:** DELRAY BEACH, FL 33467

**Title:** VPD  
**Name:** GASPERONI, CARMELLA  
**Address:** 377 FLANDERS H  
**City-St-Zip:** DELRAY BEACH, FL 33484

**Title:** FS  
**Name:** ALBANO, RONALD F DR.  
**Address:** 325 NW 22ND STREET  
**City-St-Zip:** DELRAY BEACH, FL 33444

**Title:** ORA  
**Name:** DENTE, RONALD  
**Address:** 1062 NORTH DRIVE  
**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:** JOSEPH DENTE

PD

03/20/2012

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

\_\_\_\_\_  
Date