

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729359

Entity Name: HIGH POINT OF DELRAY BEACH CONDOMINIUM ASSOC. SEC. 5, INC.**FILED**
Mar 21, 2019
Secretary of State
8009699814CC**Current Principal Place of Business:**1103 CLUB DRIVE WEST
DELRAY BCH, FL 33445-2826**Current Mailing Address:**C/O M.Y. FUTURE, INC.
213 W BOYNTON BCH BLVD
BOYNTON BCH, FL 33435-4022 US**FEI Number: 59-1833036****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SHENDELL & ASSOCIATES, P.A.
635 SE 10 STREET, SUITE 635A
DEERFIELD BEACH, FL 33441 US*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**Officer/Director Detail :**

Title	P, D
Name	WIEGAND, ROBERT
Address	1103 CLUB DRIVE W
City-State-Zip:	DELRAY BCH FL 33445

Title	S, D
Name	SEYMOUR, DOROTHY
Address	1103 CLUB DRIVE W
City-State-Zip:	DELRAY BCH FL 33445

Title	D
Name	REDMOND, MICHAEL
Address	1103 CLUB DR W
City-State-Zip:	DELRAY BCH FL 33445

Title	VP, T, D
Name	COOPER, JOHN
Address	1103 CLUB DR W
City-State-Zip:	DELRAY BCH FL 33445

Title	D
Name	WALSH, PAT
Address	1103 CLUB DR W
City-State-Zip:	DELRAY BCH FL 33445

Title	D
Name	CYKEWICK, ED
Address	1103 CLUB DR W
City-State-Zip:	DELRAY BCH 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: JOHN COOPER**TREASURER****03/21/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date