

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 758533

**FILED**  
**Mar 07, 2016**  
**Secretary of State**  
**CC4018443321**

**Entity Name:** DELRAY SOUTH SHORE CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1625 S. OCEAN BLVD.  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

1625 S. OCEAN BLVD.  
DELRAY BEACH, FL 33483 US

**FEI Number: 59-2244749**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 VP  
Name MCKINLEY, VIOLET  
Address 19049 SE KOKOMO LANE  
City-State-Zip: JUPITER FL 33458

Title PRESIDENT  
Name SOLOMON, LYNN  
Address 455 NE 5TH CT  
City-State-Zip: BOCA RATON FL 33432

Title S/T  
Name JOHNSON, MARY JO  
Address 7135 KOLDYKE ROAD  
City-State-Zip: FISHERS IN 46038

Title D  
Name BOYLAN, KARIE  
Address PO BOX 82437  
City-State-Zip: ROCHESTER HILLS MI 48308

Title D  
Name TURCOTTE, RICHARD  
Address 66 MYRTLE ST  
City-State-Zip: SOMERSWORTH NH 03878

Title DIRECTOR  
Name NASSAR, JIM  
Address 41 FAIRMONT STREET  
City-State-Zip: BURLINGTON VA 05401

Title DIRECTOR  
Name ALLEN, LARRY  
Address 2900 S. QUEBEC STREET, UNIT 15  
City-State-Zip: DENVER CO 80231

Title REGIONAL DIRECTOR OF OPERATIONS/DEFENDER RESORTS  
Name HRAY, CAROLYN  
Address 1625 S. OCEAN BLVD.  
City-State-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: CAROLYN HRAY**

**REGIONAL DIRECTOR**

**03/07/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date