

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000063733

**Entity Name:** 234 DELRAY LLC

**Current Principal Place of Business:**

234 S. SEACREST CIRCLE  
DELRAY BEACH, FL 33444

**Current Mailing Address:**

PO BOX 480427  
DELRAY BEACH, FL 33444

**FEI Number:** 47-3721362

**Certificate of Status Desired:** No

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

GOODMAN, JAN  
9782 NAPOLI WOODS LANE  
DELRAY BEACH, FL 33444 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

**Authorized Person(s) Detail :**

Title            OWNER  
Name            GOODMAN, JAN  
Address        1300 NW 17TH AVE SUITE 112  
City-State-Zip: DELRAY FL

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JAN GOODMAN

**OWNER**

**04/29/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date