

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 726438

1. Entity Name
THE YACHT & RACQUET CLUB OF BOCA RATON, INC.



Principal Place of Business
**2711 NO OCEAN BLVD
BOCA RATON, FL 33431-7115**

Mailing Address
**2711 NO OCEAN BLVD
BOCA RATON, FL 33431-7115**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04242007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-1651350

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**VAN LIEW, ROBERT J
2711 N OCEAN BLVD
BOCA RATON, FL 33431**

7. Name and Address of New Registered Agent

Name **PETER C. MOLLINGARDEN, ESQ.**
Street Address (P.O. Box Number is Not Acceptable)
**625 N. FLAGLER DR.
7th FL.
WEST PALM BEACH FL 33401**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE **TD** ☐ Delete
NAME **STENGEL, JEROME**
STREET ADDRESS **2727 N. OCEAN BLVD**
CITY-ST-ZIP **BOCA RATON, FL 33431**

TITLE **SD** ☐ Delete
NAME **SCHIFF, CAROL**
STREET ADDRESS **2701 N. OCEAN BLVD.**
CITY-ST-ZIP **BOCA RATON, FL 33431**

TITLE **PD** ☐ Delete
NAME **HELWIG, WILLIAM**
STREET ADDRESS **2667 N. OCEAN BLVD**
CITY-ST-ZIP **BOCA RATON, FL 33431**

TITLE **VPD** ☐ Delete
NAME **YEAGER, PAULA**
STREET ADDRESS **2701 N. OCEAN BLVD**
CITY-ST-ZIP **BOCA RATON, FL 33431**

TITLE **VPD** ☐ Delete
NAME **ASHER, JEROME**
STREET ADDRESS **2701 N. OCEAN BLVD**
CITY-ST-ZIP **BOCA RATON, FL 33431**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
**700103611637
05/31/07--01036--018 **\$61.25**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
\$75/23

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
07 MAY 15 PM 3:10
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

