

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 22, 2009
Secretary of State**

DOCUMENT# 732132

Entity Name: BUILDING TWO OF RACQUET CLUB APARTMENTS AT BONAVENTURE 6 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

10081 PINES BLVD
SUITE E-1
PEMBROKE PINES, FL 33024 US

New Principal Place of Business:

Current Mailing Address:

10081 PINES BLVD
SUITE E-1
PEMBROKE PINES, FL 33024 US

New Mailing Address:

FEI Number: 59-1913000 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ELITE MANAGEMENT ASSOCIATES, INC.
10081 PINES BLVD
E-1
PEMBROKE PINES, FL 33026 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: P () Delete
Name: LABOY, FRANCISCO
Address: 120 LAKEVIEW DR.
City-St-Zip: WESTON, FL 33326

Title: VPDT () Delete
Name: CASTILLO, ANNA
Address: 120 LAKEVIEW DR
City-St-Zip: WESTON, FL 33326

Title: SD () Delete
Name: ABELLA, ELVIRA
Address: 120 LAKEVIEW DR
City-St-Zip: WESTON, FL 33326

Title: T () Delete
Name: GENAO, YASMIN
Address: 120 LAKEVIEW DR
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: FRANCISCO LABOY

PRES

03/22/2009

Electronic Signature of Signing Officer or Director

Date