## **2001 UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT # 732134**

## BUILDING FOUR OF RACQUET CLUB APARTMENTS AT BONA

**FILED** Mar 12, 2001 8:00 am 8
Secretary of State
03-12-2001 90465 020 \*\*\*\*61.25

Principal Place of Business			Mailing Address					
C/O WEST BROWARD PROPERTY MANAGEMENT 11530 STATE ROAD 84 DAVIE FL 33325			C/O WEST BROWARD PROPERTY MANAGEMENT 11530 STATE ROAD 84 DAVIE FL 33325		!	<b>1888</b> (1117 <b>8</b> 17 <b>88</b> 8 17 <b>88</b> (1117 <b>1118) (1</b>	014 03091 <b>0</b> 3013 0109	1 F1817 T1811 1485
2. Principal Place of Business			3. Mailing Address					
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FEI Number 59-1804327			Applied For Not Applicable	
Zip Country		Zip Country				<b>\$8.75</b> /	Additional	
	6. Name	and Address of Current R	egistered Agent		7. Name and	Address of New Register	red Agent	
				Name				
FIORE, SALVATORE 11530 STATE ROAD 84 DAVIE FL 33325				Street A	Street Address (P.O. Box Number is Not Acceptable)			
				City			FL Zip C	ode
O The shows	named satis	. c b ito this state for	the pure of changing its re-	cistored office -				- <del></del>
b. The above	named entity	submits this statement for	the purpose of changing its re	gisterea onice o	r registered agent, or bott	n, in the state of Florida.		
SIGNATURE .		<u> </u>						
	Signature, typed	or printed name of registered agent ar	nd title if applicable. (NOTE: F	tegistered Agent signat	ure required when reinstating)	DA	TE	
						Q May Be Make Check Payable to		
FILE NOW:					\$6.00 u n.	Make Che	ck Pavable	70
					\$5.00 May Be			
	FEE IS				Added to Fees		ent of State	
10.			Trust Fund Contributi		Added to Fees		ent of Stat	9
10. TITLE		\$61.25 	Trust Fund Contributi	on.	Added to Fees	Departm	ent of Stat	IN 10
	FEE IS PD HYMAN, I	OFFICERS AND DIRECTED AND DIREC	Trust Fund Contributi	on. 🗆	Added to Fees  ADDITIONS/CHAP PD Joe Currio	Departm ANGES TO OFFICERS AND	DIRECTORS	IN 10
TITLE NAME STREET ADDRESS	PD HYMAN, I 301 RACC	OFFICERS AND DIRECTOR	Trust Fund Contributi	11. TITLE NAME STREET ADDRESS	Added to Fees  ADDITIONS/CHA PD Joe Currio 301 Racque	Departm ANGES TO OFFICERS AND Ne t Club Road	DIRECTORS	IN 10
TITLE NAME	PD HYMAN, I 301 RACC WESTON	OFFICERS AND DIRECTOR	Trust Fund Contributi	11. TITLE NAME	Added to Fees  ADDITIONS/CHA PD Joe Currio 301 Racque Weston, FL	Departm ANGES TO OFFICERS AND Ne t Club Road	DIRECTORS  Chang	e
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD HYMAN, I 301 RACC WESTON SD	OFFICERS AND DIRECTION OFFICERS AND DIRECTION OFFICERS AND DIRECTION OFFI AND STATE OF THE STATE	Trust Fund Contributi	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees  ADDITIONS/CHA PD Joe Currio 301 Racque Weston, FL SD	Departm ANGES TO OFFICERS AND Ne t Club Road 33326	DIRECTORS	IN 10 e
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD HYMAN, I 301 RACO WESTON SD BONOMO	OFFICERS AND DIRECTOR OFFICERS AND DIRECTOR OFFICERS AND DIRECTOR OFFI 33326  HELEN	Trust Fund Contributi	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Added to Fees  ADDITIONS/CHA PD Joe Currio 301 Racque Weston, FL SD Judy Sulli	Departm ANGES TO OFFICERS AND Ne t Club Road 33326 van	DIRECTORS Chang #111  Chang	e
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD HYMAN, I 301 RACO WESTON SD BONOMO 301 RACO	OFFICERS AND DIRECT CLUB ROAD #206 FL 33326  , HELEN QUET CLUB ROAD #211	Trust Fund Contributi	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees  ADDITIONS/CHA PD Joe Currio 301 Racque Weston, FL SD Judy Sulli	Departm ANGES TO OFFICERS AND Ne t Club Road 33326 van	DIRECTORS Chang #111  Chang	e
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I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:**