

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2009
Secretary of State

DOCUMENT# 766266

Entity Name: RACQUET CLUB VILLAGE APARTMENTS AT BONAVENTURE 1WEST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1145 SAWGRASS CORP.
SUNRISE, FL 33323 US

New Principal Place of Business:

Current Mailing Address:

1145 SAWGRASS CORP.
SUNRISE, FL 33323 US

New Mailing Address:

FEI Number: 59-2383878 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAKALAR, BROUGH& ,CHARON, PA
150 S PINE ISLAND ROAD, #540
FORT LAUDERDALE, FL 33324 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: D () Delete
Name: MATOS, MILLIE
Address: 177 LAKEVIEW DR. #204
City-St-Zip: FORT LAUDERDALE, FL 33326

Title: D () Delete
Name: REYES, LUZ
Address: 189 LAKEVIEW DR. #204
City-St-Zip: FORT LAUDERDALE, FL 33326

Title: P () Delete
Name: PIETERSZ, EDWARD
Address: 183 LAKEVIEW DR STE 103
City-St-Zip: FORT LAUDERDALE, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ORDEHI, RAISA
Address: 1145 SAWGRASS CORP PKY
City-St-Zip: SUNRISE, FL 33323

Title: D (X) Change () Addition
Name: REYES, LUZ
Address: 1145 SAWGRASS CORP PKY
City-St-Zip: SUNRISE, FL 33323

Title: P (X) Change () Addition
Name: PIETERSZ, EDWARD
Address: 1145 SAWGRASS CORP PKY
City-St-Zip: SUNRISE, FL 33323

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: EDWARD PIETERSZ

P

03/31/2009

Electronic Signature of Signing Officer or Director

_____ Date