

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **766563 (1)**
1. Corporation Name
PLANTATION RACQUET CLUB CONDOMINIUM ASSOCIATION, INC.

000001741300
-03/13/96--01043--007
***70.00



Principal Place of Business: 10401 W. BROWARD BLVD. PLANTATION FL 33324
Mailing Address: 10401 W. BROWARD BLVD. PLANTATION FL 33324

3. Date Incorporated or Qualified: 01/14/1983
3a. Date of Last Report: 04/26/1995
4. FEI Number: 59-1820033
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business
21. Suite, Apt. #, etc.
22. City & State
23. Zip
24. Country
25. Mailing Address
26. Suite, Apt. #, etc.
27. City & State
28. Zip
29. Country
30.

9. Name and Address of Current Registered Agent
BUCHOLTZ, PAUL A
10401 W. BROWARD BLVD., #108
PLANTATION FL 33324

10. Name and Address of New Registered Agent
81. Name: Joseph T. Ruwe
82. Street Address (P.O. Box Number is Not Acceptable): 10501 W. Broward Blvd. # 411
83. City: Plantation, FL
84. City: FL
85. Zip Code: 33324

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *Joseph T. Ruwe* (NOTE: Registered Agent signature required when reinstating)
DATE: 1/22/95

12. OFFICERS AND DIRECTORS		
TITLE	PD	<input type="checkbox"/> DELETE
NAME	SIMMERS, CHERYL L	
STREET ADDRESS	10501 W. BROWARD BLVD, #403	
CITY-ST-ZIP	PLANTATION FL	
TITLE	VTD	<input checked="" type="checkbox"/> DELETE
NAME	BUCHOLTZ, PAUL A.	
STREET ADDRESS	10401 W. BROWARD BLV., #108	
CITY-ST-ZIP	PLANTATION FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	RUWE, JOE T	
STREET ADDRESS	10501 W. BROWARD BLVD. #411	
CITY-ST-ZIP	PLANTATION FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WEBER, JACK	
STREET ADDRESS	10551 W. BROWARD BLVD, #111	
CITY-ST-ZIP	PLANTATION FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BROWN, LINDA	
STREET ADDRESS	10451 W. BROWARD BLVD	
CITY-ST-ZIP	PLANTATION FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ANNUNZIATO, DEBRA	
STREET ADDRESS	10501 W. BROWARD BLVD, #108	
CITY-ST-ZIP	PLANTATION FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Joseph T. Ruwe (PD)	
1.3 STREET ADDRESS	10501 W. Broward Blvd. # 411	
1.4 CITY-ST-ZIP	Plantation, FL 33324	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Linda R. Brown (VTD)	
2.3 STREET ADDRESS	10451 W. Broward Blvd # 409	
2.4 CITY-ST-ZIP	Plantation, FL 33324	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Cheryl L. Simmers (SD)	
3.3 STREET ADDRESS	10501 W. Broward Blvd # 403	
3.4 CITY-ST-ZIP	Plantation, FL 33324	
4.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	JAMES WOLFRAB	
4.3 STREET ADDRESS	5030 Champion Blvd - 4-206 (owner)	
4.4 CITY-ST-ZIP	Boca Raton, FLA 33496	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	JACK WEBER (D)	
5.3 STREET ADDRESS	10551 W. Broward Blvd # 111	
5.4 CITY-ST-ZIP	Plantation, FLA. 33324	
6.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Rita Lasser (D)	
6.3 STREET ADDRESS	10501 W. Broward Blvd # 201	
6.4 CITY-ST-ZIP	Plantation, FL 33324	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Joseph T. Ruwe* (NOTE: Signature and typed or printed name of signing officer or director)
DATE: 1/22/96

CR2E037 (12/95)