

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2002 8:00 am
Secretary of State

03-14-2002 90057 017 ****61.25

DOCUMENT # 738236

1. Entity Name

**BUILDING EIGHT OF RACQUET CLUB APARTMENTS AT BON
 AVENTURE 5 CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

% D.C.I.
 2901 SIMMS ST
 HOLLYWOOD FL 33020

% D.C.I.
 2901 SIMMS ST
 HOLLYWOOD FL 33020

2. Principal Place of Business

3. Mailing Address

Building Eight of Racquet Club c/o DCI c/o DCI

Suite, Apt. #, etc.

Suite, Apt. #, etc.

2035 Harding Street #200

2035 Harding Street #200

City & State

City & State

Hollywood, Florida

Hollywood, FL

Zip

Country

Zip

Country

33020

USA

33020

USA

4. FEI Number

59-1913634

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**D.C.I.
 2901 SIMMS ST
 ATTN: ANDREW MAYROWITZ
 HOLLYWOOD FL 33020**

Name **D.C.I. Attn: Andrew Mayrowitz**

Street Address (P.O. Box Number is Not Acceptable)
2035 Harding Street

Suite 200

City

Hollywood

FL

Zip Code
33020

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
 NAME **HUDDLE, ROBERT DR.**
 STREET ADDRESS **220 LAKEVIEW DR. #213**
 CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **PD** ☒ Change ☐ Addition
 NAME **Huddle, Robert, Dr.**
 STREET ADDRESS **220 Lakeview Drive #213**
 CITY-ST-ZIP **Weston, FL 33326**

TITLE **STD** ☐ Delete
 NAME **HUDDLE, ELEN**
 STREET ADDRESS **220 LAKEVIEW DRIVE #213**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33326**

TITLE **SD** ☒ Change ☐ Addition
 NAME **Huddle, Ellen**
 STREET ADDRESS **220 Lakeview Drive #213**
 CITY-ST-ZIP **Weston, FL 33326**

TITLE **VP** ☐ Delete
 NAME **SOHNE, ROBERT**
 STREET ADDRESS **220 LAKEVIEW DR. #309**
 CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **VP** ☒ Change ☐ Addition
 NAME **Sohne, Robert**
 STREET ADDRESS **220 Lakeview Drive #309**
 CITY-ST-ZIP **Weston, FL 33326**

TITLE **D** ☒ Delete
 NAME **SHARONI, ANNE**
 STREET ADDRESS **2117 BROWN STREET**
 CITY-ST-ZIP **BROOKLYN NY 11229**

TITLE **D** ☐ Change ☒ Addition
 NAME **Rosebrough, Margie**
 STREET ADDRESS **220 Lakeview Drive #203**
 CITY-ST-ZIP **Weston, FL 33326**

TITLE **D** ☐ Delete
 NAME **SEJO, G**
 STREET ADDRESS **220 LAKEVIEW DR #106**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33326**

TITLE **D** ☒ Change ☐ Addition
 NAME **Seijo, Gabriella**
 STREET ADDRESS **220 Lakeview Drive #106**
 CITY-ST-ZIP **Weston, FL 33326**

TITLE ☐ Delete
 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 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:

Robert Huddle
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/02 954-389-0429
 Date Daytime Phone #

CR2E037 (9/01)