

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 738391

**FILED**  
**Aug 13, 2019**  
**Secretary of State**  
**2808293698CC**

**Entity Name:** BUILDING TEN OF RACQUET CLUB APARTMENTS AT  
BONAVENTURE 5 CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

T & G MANAGEMENT SERVICES, INC  
18001 OLD CUTLER ROAD SUITE 643  
PALMETTO BAY, FL 33157

**Current Mailing Address:**

T & G MANAGEMENT SERVICES, INC.  
18001 OLD CUTLER ROAD SUITE 643  
PALMETTO BAY, FL 33157 US

**FEI Number: 59-1920155**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

T & G MANAGEMENT SERVICES, INC.  
T & G MANAGEMENT SERVICES, INC  
18001 OLD CUTLER ROAD SUITE 643  
PALMETTO BAY, FL 33157 US

*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: ANTHONY P. LESTER**

**08/13/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PRESIDENT  
Name           SALAZAR, RAUL S  
Address        18001 OLD CUTLER ROAD, STE 643  
City-State-Zip: PALMETTP BAY FL 33157

Title           DIRECTOR, VP  
Name           PLOTNIK, ALBERTO  
Address        18001 OLD CUTLER ROAD, STE 643  
City-State-Zip: PALMETTO BAY FL 33157

Title           TREASURER  
Name           NEVAREZ, NATIVIDAD  
Address        18001 OLD CUTLER ROAD, STE 643  
City-State-Zip: PALMETTO BAY FL 33157

Title           DIRECTOR  
Name           HYMANSON, HERB  
Address        18001 OLD CUTLER ROAD  
                  SUITE 643  
City-State-Zip: PALMETTO BAY FL 33157

Title           SECRETARY  
Name           FISHER, JOSHUA  
Address        18001 OLD CUTLER ROAD  
                  SUITE 643  
City-State-Zip: PALMETTO BAY FL 33157

*I hereby 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 all other like empowered.*

**SIGNATURE: SALAZAR , RAUL S**

**PRESIDENT**

**08/13/2019**

Electronic Signature of Signing Officer/Director Detail

Date