

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749476

Entity Name: RACQUET CLUB GARDEN APARTMENTS AT BONAVENTURE 9
-A NORTH CONDOMINIUM ASSOCIATION, INC.**FILED**
May 25, 2023
Secretary of State
2142312536CC**Current Principal Place of Business:**C/O PHOENIX MANAGEMENT SERVICES, INC.
4800 N. STATE ROAD 7 # 105
LAUDERDALE LAKES , FL 33319**Current Mailing Address:**C/O PHOENIX MANAGEMENT SERVICES, INC.
4800 N. STATE ROAD 7 # 105
LAUDERDALE LAKES , FL 33319 US**FEI Number: 59-1944113****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**PHOENIX MANAGEMENT SERVICES, INC.
C/O PHOENIX MANAGEMENT SERVICES, INC.
4800 N. STATE ROAD 7 # 105
LAUDERDALE LAKES , FL 33319 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: SHELDON GOLDBERG****05/25/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	SECRETARY
Name	MARTINEZ, CRISMARY
Address	C/O PHOENIX MANAGEMENT SERVICES, INC. 4800 N. STATE ROAD 7 # 105
City-State-Zip:	LAUDERDALE LAKES FL 33319

Title	PRESIDENT
Name	WILLIAMSON, TROY
Address	C/O PHOENIX MANAGEMENT SERVICES, INC. 4800 N. STATE ROAD 7 # 105
City-State-Zip:	LAUDERDALE LAKES FL 33319

Title	VP
Name	ECHEVERRIA, JUAN CARLOS
Address	C/O PHOENIX MANAGEMENT SERVICES, INC. 4800 N. STATE ROAD 7 # 105
City-State-Zip:	LAUDERDALE LAKES FL 33319

Title	TREASURER
Name	SALAZAR, JENNIFER
Address	C/O PHOENIX MANAGEMENT SERVICES, INC. 4800 N. STATE ROAD 7 # 105
City-State-Zip:	LAUDERDALE LAKES FL 33319

Title	DIRECTOR
Name	DA CRUZ, ROSEANGELA
Address	C/O PHOENIX MANAGEMENT SERVICES, INC. 4800 N. STATE ROAD 7 # 105
City-State-Zip:	LAUDERDALE LAKES FL 33319

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: TROY WILLIAMSON**PRESIDENT****05/25/2023**

Electronic Signature of Signing Officer/Director Detail

Date