

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2000 8:00 am
Secretary of State

02-01-2000 90029 029 ****61.25

DOCUMENT # 732134

1. Entity Name

BUILDING FOUR OF RACQUET CLUB APARTMENTS AT BONA



DO NOT WRITE IN THIS SPACE

Principal Place of Business C/O WEST BROWARD PROPERTY MANAGEMENT 11530 STATE ROAD 84 DAVIE FL 33325		Mailing Address C/O WEST BROWARD PROPERTY MANAGEMENT 11530 STATE ROAD 84 DAVIE FL 33325-4022		4. FEI Number 59-1804327 Applied For <input type="checkbox"/> Not Applicable
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		
City & State		City & State		
Zip	Country	Zip	Country	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				

6. Name and Address of Current Registered Agent FIGRE, SALVATORE 11530 STATE ROAD 84 DAVIE FL 33325		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
---	--	---	--

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: *Herbert Hyman* (NOTE: Registered Agent signature required when reinstating) DATE: **1/18/00**

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 NAME STREET ADDRESS CITY-ST-ZIP	PD HYMAN, HERB 301 RACQUET CLUB ROAD #206 WESTON FL 33326 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Herb Hyman 301 Racquet Club Road # 206 Weston, FL 33326 <input type="checkbox"/> Change <input type="checkbox"/> Addit
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BONOMO, HELEN 301 RACQUET CLUB ROAD #211 WESTON FL 33326 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President Judy Sullivan 301 Racquet Club Road # 311 eston, FL 33326 <input type="checkbox"/> Change <input type="checkbox"/> Addit
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CURIONE, JOSEPH 301 RACQUET CLUB ROAD #111 WESTON FL 33326 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Helen Bonomo 301 Racquet Club Road # 211 eston, FL 33326 <input type="checkbox"/> Change <input type="checkbox"/> Addit
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERKOWITZ, MELVIN 301 RACQUET CLUB ROAD #103 WESTON FL 33326 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Joe Currione 301 Racquet Club Road #111 Weston, FL 33326 <input type="checkbox"/> Change <input type="checkbox"/> Addit
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TASSINARI, MARY 301 RAQUET CLUB ROAD #202 WESTON FL 33326 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addit
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addit

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: *Herbert Hyman* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **HERBERT HYMAN** Date: **1/18/00** Daytime Phone #