

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# 736776

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

Current Principal Place of Business:

11530 STATE ROAD 84
DAVIE, FL 33325 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 551390
DAVIE, FL 33325

New Mailing Address:

FEI Number: 59-1914538 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIORE, SALVATORE
11530 STATE ROAD 84
DAVIE, FL 33325 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WOODBURN, JOHN
Address: 200 LAKEVIEW DR., #307
City-St-Zip: WESTON, FL 33326

Title: ST () Delete
Name: GOLDBERG, ROSALIND
Address: 200 LAKE VIEW DR 112
City-St-Zip: FORT LAUDERDALE, FL 33326

Title: VP () Delete
Name: SHERMAN, DONALD
Address: 200 LAKEVIEW DR, STE 312
City-St-Zip: FORT LAUDERDALE, FL 33326

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: GOLDBERG, ROSALIND
Address: 200 LAKE VIEW DR 112
City-St-Zip: WESTON, FL 33326

Title: VP (X) Change () Addition
Name: SHERMAN, DONALD
Address: 200 LAKEVIEW DR, STE 312
City-St-Zip: WESTON, FL 33326

Title: T () Change (X) Addition
Name: TACHER, CHARLENE
Address: 200 LAKEVIEW DR #302
City-St-Zip: WESTON, FL 33326

Title: D () Change (X) Addition
Name: VALENCIA, ANDRES
Address: 200 LAKEVIEW DR #306
City-St-Zip: WESTON, FL 33326

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN WOODBURN

P

04/24/2009

Electronic Signature of Signing Officer or Director

Date