2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744529

Feb 27, 2009 Secretary of State

Entity Name: RACQUET CLUB APARTMENTS AT BONAVENTURE 4 SOUTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

10034 W. MCNAB ROAD TAMARAC, FL 33321

Current Mailing Address: New Mailing Address:

CCM, INC 10034 W. MCNAB ROAD TAMARAC, FL 33321

FEI Number: 59-1913092 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BROUGH, CHADROW & LEVINE, P.A. 1900 NORTH COMMERCE PKWY WESTON, FL 33326

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

FEUER, MITCHELL FEUER, MITCHELL Name: Name: 215 LAKEVIEW DR., APT 106 Address: 10034 W. MCNAB ROAD Address: WESTON, FL 33326 TAMARAC, FL 33321 City-St-Zip: City-St-Zip:

Title: VPD Title: (X) Change () Addition () Delete

FEUER, TOBY Name: FEUER, TOBY Name:

Address: 213 LAKEVIEW DR., APT 101 Address: 10034 W MCNAB ROAD City-St-Zip: WESTON, FL 33326 City-St-Zip: TAMARAC, FL 33321

Title: () Delete Title: (X) Change () Addition

GONZALEZ, CARLOS M GONZALEZ, CARLOS M Name: Name: 215 LAKEVIEW DR., #202 Address: Address: 10034 W MCNAB ROAD City-St-Zip: WESTON, FL 33326 City-St-Zip: TAMARAC, FL 33321

Title: () Delete Title: (X) Change () Addition

Name: BARONE, ANN L Name: BARONE, ANN L 213 LAKEVIEW DR., #102 10034 W MCNAB ROAD Address: Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: TAMARAC, FL 33321

Title: () Delete Title: (X) Change () Addition

ALVAREZ, GEUARO ALVAREZ, GEUARO Name: Name: 231 LAKEVEIW DR. #106 10034 W MCNAB ROAD Address: Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: TAMARAC, FL 33321

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: MITCHELL FEUER Ρ 02/27/2009