## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 27, 2008 8:00 am

	ANNOAL	ILLI OILI		Secretary of State
DOCUMENT # 744530  1. Entity Name RACQUET CLUB AT BONAVENTURE 4 NORTH CONDOMINIUM ASSOCIATION, INC.				03-27-2008 90032 040 ****61.25
Principal Plac CCM, INC. 10034 W MC TAMARAC, FL	: Nab RD.	Mailing Address C/O CCM, INC. 10034 W MCNAB RD. TAMARAC, FL 33321		 I seriin iger bhar bher bheat irin ean dhan bhan bheat irin ean bhan bhan bhan bhan eilein eileac
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address	•	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01032008 Chg-NP CR2E037 (12/06)
City & Stat	e	City & State		4. FEI Number
Zip	: Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent—
7520 NW 5 SUITE 203	NFELD, DAVID 5TH STREET 3 ON, FL 33301			e at 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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE				
Signature, typed or printed name of registored agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  OATE				
	Filing Fee is \$61.25 Due by May 1, 2008	Trust Fund	ampaign Financing Contribution.	Added to Fees Florida. Department of State
10.	OFFICERS AND DIF	RECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MUNOZ, JUAN CARLOS 197 LAKEVIEW DRIVE, #202 WESTON, FL 33326	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Monan Mir Pari ss 197 1942 view DR. # 201 Weston, PL 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CISNEROS, ROBERT 201 LAKEVIEW DRIVE, #103 WESTON, FL 33326	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP	BOSSMAN, PHILLIPPE 193 LAKEVIEW DRIVE, #105 WESTON, FL 33326	☐ Delete	TITLE NAME STREET AUDRESS CITY-ST-ZIP	Dhillipe Dossman Bachange Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TORREJOU, MANUEL 201 LAKEVIEW DRIVE, #204 WESTON, FL 33326	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SUAREZ, NORA 201 LAKEVIEW DRIVE, #204 WESTON, FL 33326	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC-Tres Nord Surez
TITLE NAME STREET AODRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

| SIGNATURE: | | Signature | Sig