2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744530

FILED Mar 09, 2009 Secretary of State

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

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

10034 W MCNAB RD. TAMARAC, FL 33321

New Mailing Address: Current Mailing Address:

C/O CCM, INC 10034 W MCNAB RD TAMARAC, FL 33321

FEI Number: 59-1913088 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:

SCHOTTENFELD, DAVID BROUGH CHADROW & LEVINE 7520 NW 5TH STREET 1900 N. COMMERCE PARKWAY SUITE 203 WESTON, FL 33326 PLANTATION, FL 33301 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: MICHAEL CHADROW 03/09/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete MOHAN, MIDORI BOEHLE, VALERIE Name: Name: 197 1AKEVIEW DR. #201 Address: 197 LAKEVIEW DR #203 Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: WESTON, FL 33326

Title: () Delete Title: (X) Change () Addition DOSSMAN, PHILLIPE Name: BOSSMAN, PHILLIPE Name: Address: 193 LAKEVIEW DRIVE, #105 Address: 193 LAKEVIEW DRIVE, #105

City-St-Zip: WESTON, FL 33326 City-St-Zip: WESTON, FL 33326

Title: () Delete Title: (X) Change () Addition TORREJOU, MANUEL MCGEE, RYAN Name: Name:

201 LAKEVIEW DRIVE, #204 195 LAKEVIEW DRIVE, #105 Address: Address:

City-St-Zip: WESTON, FL 33326 City-St-Zip: WESTON, FL 33326

Title: ST () Delete Title: ST (X) Change () Addition Name: SUAREZ, NORA Name: WOODWARD, LUISA

201 LAKEVIEW DRIVE, #204 195 LAKEVIEW DRIVE, #201 Address: Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: WESTON, FL 33326

Title: Title: () Change (X) Addition

() Delete PRIETO, MARIA Name: Name: 193 LAKEVIEW DR #104 Address: Address: City-St-Zip: 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: PHILLIPE BOSSMAN PD 03/09/2009