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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

745515 DOCUMENT #
1. Corporation Name

(7)

THE YACHT & RACQUET CLUB OF BOCA RATON CONDOMINI UM ASSOCIATION "E", INC.

Principal Place of Business

Mailing Address



2701 N. OCEAN BLVD. BOCA RATON FL 33431-7115		2701 N. OCEAN BLVD. BOCA RATON FL 33431-7115						
						3. Date Incorporated or Qualified 01/10/1979	3a. Date of t 05/0	ast Report 1/1995
2. Principal Pla	ace of Business	2a. Mailing Addre	Mailing Address		4. FEI Number		Applied For	
21		26				59-1887316 Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1	.75 Additional ee Required	
City & State		City & State				Election Campaign Financing Trust Fund Contribution	1 1	5.00 May Be dded to Fees
Zip 24	Country 25	Ζφ 29	30	ountry			Yes No	
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New R	egistered Agent	
				81	Name			
JOHNSON, SHAWN D. 2711 N. OCEAN BLVD.				62	Street Ad	dress (P.O. Box Number is Not Acceptab	le)	
BOCA RATON FL 33431				83				
				84 City			or l	Zip Code
				04	City		FL 85	zip Code
or register	to the provisions of Sections 617.050 red agent, or both, in the State of Flor th, and accept the obligations of, Sec	rida. Such change was a	authorized by the	oove-na e corpo	imed corp ration's bo	oration submits this statement for the pur pard of directors. I hereby accept the appo	pose of changing pintment as registe	its registered office ered agent. I am
SIGNATURE								
	Signature, typed or printed name of registered age:	or and tise if applicable ND DIRECTORS			Sign affore 160 po	red wher reinstaling: ADDITIONS/CHANGES TO OFF	DATE DATE OR: ANIES ENDRE	CYLODS IN IT.
12.	PD OFFICERS AN	DELE	15 15	TITLE		ACTITIONS CERVISES TO CIT	Char	
NAME	NIXON, DAVID	Посте		NAME				igo
STREET ADDRESS	2701 N. OCEAN BLVD.			STREET A	DORESS			
CITY-ST-ZIP	BOCA RATON FL			CHY-SI				
TIFLE	VD	DELE		TITLE			Char	nge 🔲 Addition
NAME	CANUSO, FRANCIS III		22	NAME				
STREET ADDRESS	2701 N. OCEAN BLVD.		23	STREET A	DDRESS			
CITY - ST - ZIP	BOCA RATON FL		2 4	4 CiTY - ST	- ZIF			
TITLE	SD	DELE	TE 31	TITLE		ጥD	Chai	nge 🙀 Addition
NAME	DIAMOND, IRVING		32	NAME		DIAMOND, IRVING		
STREET ADDRESS	2701 N. OCEAN BLVD.		33	STREET A	DDRESS	2701 N. OCEAN BLVI) .	
CITY-ST-ZIP	BOCA RATON FL			CITY-SI	ZIF	BOCA RATON FL		
TITLE	D	0£1.6		HILE		D	Chai	nge Addition
NAME	Joseph, Henry		4 2	2 NAME	i	_		
*******	0704 N 005 N DUG					HELLMAN, SY		
STREE1 ADORESS	2701 N. OCEAN BLVD.			STHEET A	เมษายออ	HELLMAN, SY 2701 N. OCEAN BLVI	٦.	
CITY - ST - ZIP	BOCA RATON FL		4.4	CITY-ST	בפשתעע	2701 N. OCEAN BLVI		
CITY-ST-ZIP TITLE	BOCA RATON FL D	DELE	4.4 FTE 5.1	BILE	בפשתעע		D . ☐ Ghai	nge Addition
CITY-ST-ZIP TITLE NAME	BOCA RATON FL D NOREN, PETER	DELI	44 FTE 51	CITY - ST TITLE NAME	- ZIP	2701 N. OCEAN BLVI		nge Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	BOCA RATON FL D NOREN, PETER 2701 N. OCEAN BLVD.	DELI	44 FIE 51 52 53	CITY - ST THLE NAME STREET A	- ZIP - OORESS	2701 N. OCEAN BLVI		nge 🗖 Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOCA RATON FL D NOREN, PETER 2701 N. OCEAN BLVD. BOCA RATON FL	_	44 FTE 51 52 53	DITY - ST TRILE NAME STREET A	- ZIP - OORESS	2701 N. OCEAN BLVI	☐ Chai	<u> </u>
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	BOCA RATON FL D NOREN, PETER 2701 N. OCEAN BLVD. BOCA RATON FL D	□ DELLI	44 FTE 51 52 53 54 ETE 61	TITLE NAME STREET A CHY-ST	- ZIP - OORESS	2701 N. OCEAN BLVI		<u> </u>
CITY-ST-ZIP TITLE NAME SPREEF ADDRESS CITY-ST-ZIP TITLE NAME	BOCA RATON FL D NOREN, PETER 2701 N. OCEAN BLVD. BOCA RATON FL D NYE, BILL	_	44 FTE 51 52 53 54 ETE 61 62	DILE NAME STREET A CITY-ST	. ZIP . DORESS . DORESS	2701 N. OCEAN BLVI	☐ Chai	<u> </u>
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	BOCA RATON FL D NOREN, PETER 2701 N. OCEAN BLVD. BOCA RATON FL D	_	44 FTE 51 52 53 54 ETE 61 62	TITLE NAME STREET A CHY-ST	DORESS LOORESS	2701 N. OCEAN BLVI	☐ Chai	<u> </u>

roomers you may mak the information supplied whith this limits is voluntarily turnished and does not quality for the exemption stated in social 119.07 (5)(k), ribinds Statutes, further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under early that I am an officer or director of the corporation or the neceiver or trustee empowered to execute this report as required by Chapter 617. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

3/27/96