2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

Souny)

SIGNATURE AND TYPED

DIAmons

IRVING-

May 29, 2002 8:00 am Secretary of State DOCUMENT # **745515** 1. Entity Name 05-01-2002 91540 017 ****61.25 THE YACHT & RACQUET CLUB OF BOCA RATON CONDOMINI UM ASSOCIATION "E", INC. Principal Place of Business Mailing Address 89608 2701 N. OCEAN BLVD. 2701 N. OCEAN BLVD. BOCA RATON FL 33431-7115 BOCA RATON FL 33431-7115 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1887316 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BERTORELLI, THOMAS GENERAL MANAGER WOOD, RICHARD W Street Address (P.O. Box Number is Not Acceptable) 2711 N. OCEAN BLVD. BOCA RATON FL 33431 2711 N. OCEAN BLVD City BOCA RATON 33431 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 CONFILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE - PCC PD Delete TITLE NAME TO A NIXON, DAVE ☐ Change ☐ Addition 9/01 NAME STREET ADDRESS 2701 N, OCEAN BLVD. STREET ADDRESS CITY-ST-ZIP CR2E037 **BOCA RATON FL** CITY-ST-ZIP TITLE ☐ Delete TITLE NAME DIAMOND, SONNY ☐ Change ☐ Addition NAME STREET ADDRESS 2701 N. OCEAN BLVD. STREET ADDRESS CITY-ST-ZIE **BOCA RATON FL** CITY-ST-ZIP TITLE Oelete TITLE SAXL-JOE ---Change Addition NAME NAME STREET ADDRESS 2701 N. OCEAN BLVD. STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL** CITY-ST-ZIP SD TITLE Delete TITLE SD NAZZIKA, STEVE Change ☐ Addition NAME NAME STREET ADDRESS 2701 N. OCEAN BLVD. MAZZOLA, STEVE STREET ADDRESS 2701 N. OCEAN BLVD, BOCA RATON FL CITY-ST-ZIE **BOCA RATON FL** CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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

FILED