

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90034 021 ****61.25

DOCUMENT # 745515

1. Entity Name
**THE YACHT & RACQUET CLUB OF BOCA RATON
CONDOMINIUM ASSOCIATION "E", INC.**



Principal Place of Business
**2701 N. OCEAN BLVD.
BOCA RATON, FL 33431-7115**

Mailing Address
**2701 N. OCEAN BLVD.
BOCA RATON, FL 33431-7115**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02222008

Chg-NP

CR2E037 (12/06)

4. FEI Number
59-1887316

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**VAN LIEW, ROBERT J GM
2711 N OCEAN BLVD
BOCA RATON, FL 33431**

7. Name and Address of New Registered Agent

Name **MOLLENGARDEN PETER C ESQ**

Street Address (P.O. Box Number is Not Acceptable)
BECKER POLOIAKOFF PA

625 N FLAGLER DR 7th Fl

City **W PALM BEACH**

FL

Zip Code
33401

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 registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME NIXON, DAVE ☒ Delete
STREET ADDRESS 2701 N. OCEAN BLVD.
CITY-ST-ZIP BOCA RATON, FL

TITLE VD
NAME SAX, JOE ☐ Delete
STREET ADDRESS 2701 N. OCEAN BLVD
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE SD
NAME YEAGER, PAULA ☐ Delete
STREET ADDRESS 2701 N. OCEAN BLVD.
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE TD
NAME SILK, ROBERT ☒ Delete
STREET ADDRESS 2701 N. OCEAN BLVD.
CITY-ST-ZIP BOCA RATON, FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE TD
NAME HARROW, ROBERT ☐ Change ☒ Addition
STREET ADDRESS 2701 N. OCEAN BLVD
CITY-ST-ZIP BOCA RATON FL 33431

TITLE PD
NAME SAX, JOE ☒ Change ☐ Addition
STREET ADDRESS 2701 N. OCEAN BLVD
CITY-ST-ZIP BOCA RATON FL 33431

TITLE VD
NAME YEAGER, PAULA ☒ Change ☐ Addition
STREET ADDRESS 2701 N. OCEAN BLVD
CITY-ST-ZIP BOCA RATON FL 33431

TITLE SD
NAME ROSIN, ELAINE ☐ Change ☒ Addition
STREET ADDRESS 2701 N. OCEAN BLVD
CITY-ST-ZIP BOCA RATON FL 33431

TITLE D
NAME ASHER, JEROME ☐ Change ☒ Addition
STREET ADDRESS 2701 N. OCEAN BLVD
CITY-ST-ZIP BOCA RATON FL 33431

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Joseph Sax

JOSEPH SAX

2/25/08

561-368-8032

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #