

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 17, 2004 8:00 am
Secretary of State

05-17-2004 90015 036 ****61.25

DOCUMENT # 746743

1. Entity Name

THE YACHT & RACQUET CLUB OF BOCA RATON
CONDOMINIUM ASSOCIATION "F", INC.



Principal Place of Business

2697 N. OCEAN BLVD.
BOCA RATON FL 33431-7115

Mailing Address

2697 N. OCEAN BLVD.
BOCA RATON FL 33431-7115

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1943666

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

24076115



MOORE

CR2E037 (11/03)

6. Name and Address of Current Registered Agent

MANDELL, BOB
2711 N OCEAN BLVD
BOCA RATON FL 33431

7. Name and Address of New Registered Agent

Name

PETER REINHARD

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

2711 N. OCEAN BLVD.

City

BOCA RATON

FL

Zip Code

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. 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

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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 Delete
NAME FRÄKHAUSER, WILLIAM
STREET ADDRESS 2697 N OCEAN BLVD
CITY-ST-ZIP BOCA RATON FL 33431

TITLE Delete
NAME PD PETHO, LOU
STREET ADDRESS 2697 N OCEAN BLVD
CITY-ST-ZIP BOCA RATON FL

TITLE Delete
NAME SD FELDMAN, IRWIN
STREET ADDRESS 2697 N. OCEAN BLVD
CITY-ST-ZIP BOCA RATON FL

TITLE Delete
NAME TD FINESMITH, MAX
STREET ADDRESS 2697 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 Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 exemption stated in Section 119.07(3)(i), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/31/04

Date

Daytime Phone #