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FILED
May 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 748054 (4)
1. Corporation Name
THE YACHT & RACQUET CLUB OF BOCA RATON CONDOMINIUM ASSOCIATION "H", INC.



Principal Place of Business: 2717 NO OCEAN BLVD BOCA RATON FL 33431-7115
Mailing Address: 2717 NO OCEAN BLVD BOCA RATON FL 33431-7115

3. Date Incorporated or Qualified: 07/11/1979
4. FEI Number: 59-1943662
Applied For: Not Applicable

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
JOHNSON, SHAWN D
1478 SPRINGSIDE DRIVE
FT. LAUDERDALE FL 33326

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		
TITLE	PD	<input type="checkbox"/> DELETE
NAME	DICKINSON, DOROTHY	
STREET ADDRESS	2717 N. OCEAN BLVD.	
CITY-ST-ZIP	BOCA RATON, FL 00000	
TITLE	VPTD	<input checked="" type="checkbox"/> DELETE
NAME	PLOTCH, ELI	
STREET ADDRESS	2717 N. OCEAN BLVD.	
CITY-ST-ZIP	BOCA RATON, FL 00000	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	LEVEY, BARRY	
STREET ADDRESS	2717 N. OCEAN BLVD.	
CITY-ST-ZIP	BOCA RATON, FL 00000	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	STRUGELL, CHARLES	
STREET ADDRESS	2677 N OCEAN BLVD	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ALROD, ROBERT	
STREET ADDRESS	2717 N. OCEAN BLVD.	
CITY-ST-ZIP	BOCA RATON FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	LEVEY, BARRY	
2.3 STREET ADDRESS	2717 N. OCEAN BLVD	
2.4 CITY-ST-ZIP	BOCA RATON, FL	
3.1 TITLE	SD/TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	GROSSMAN, LOUIS	
3.3 STREET ADDRESS	2717 N. OCEAN BLVD	
3.4 CITY-ST-ZIP	BOCA RATON, FL	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, upon an attachment with an address.

SIGNATURE: * *[Signature]* Date: 4-20-98 Daytime Phone #: 561-368-8032
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/97)