

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2007 08:00 AM
Secretary of State

DOCUMENT # 748054		
1. Entity 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	



01122007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1943662	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent VANLIEW, ROBERT J CA 2711 NORTH OCEAN BLVD BOCA RATON, FL 33431	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DICKINSON, DORATHY 2717 N. OCEAN BLVD. BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WERNER, LOU 2717 N. OCEAN BLVD. BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ELRAD, MARVIN 2717 N. OCEAN BLVD. BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PLOTCH, ELI 2717 N OCEAN BVD BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/02/07-80025-006 61.25

**DO NOT WRITE
IN THIS SPACE**

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: *Louis Werner* **2.207** **312-498-1900**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #