

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749476

FILED
Apr 23, 2009
Secretary of State

Entity Name: RACQUET CLUB GARDEN APARTMENTS AT BONAVENTURE 9-A NORTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

11530 STATE ROAD 84
DAVIE, FL 33325

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 551390
DAVIE, FL 333551390

New Mailing Address:

FEI Number: 59-1944113 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WEST BROWARD COMMUNITY MANAGEMENT, INC.
11530 STATE ROAD 84
DAVIE, FL 33325 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DIONISIO, GOMEZ
Address: 302 LAKEVIEW DRIVE, SUITE #102
City-St-Zip: WESTON, FL 33326

Title: S () Delete
Name: PINILLA, CHRISTINA
Address: 328 LAKEVIEW DRIVE, SUITE #101
City-St-Zip: WESTON, FL 33326

Title: P () Delete
Name: ECHEVERRIA, JUAN
Address: 350 LAKEVIEW DR # 103
City-St-Zip: WESTON, FL 33326

Title: VP () Delete
Name: VICARIA, ANTONIO
Address: 334 LAKEVIEW DR # 203
City-St-Zip: WESTON, FL 33326

Title: D (X) Delete
Name: RUANO, HUGO
Address: 318 LAKEVIEW DRIVE, SUITE #203
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: JACKSON, KATHLEEN
Address: 318 LAKEVIEW DR #104
City-St-Zip: WESTON, FL 33326

Title: T (X) Change () Addition
Name: ECHEVERRIA, JUAN
Address: 350 LAKEVIEW DR # 103
City-St-Zip: WESTON, FL 33326

Title: P (X) Change () Addition
Name: GARCIA, LEONARDO
Address: 302 LAKEVIEW DR #205
City-St-Zip: WESTON, FL 33326

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEONARDO GARCIA

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date