

FILE NOW: FILING FEE IS \$61.25

FILED

**Jan 30 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 753248 (4)

1. Corporation Name
RACQUET CLUB APARTMENTS AT BONAVENTURE 21 CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 440 LAKEVIEW DRIVE APT. 203 FT. LAUDERDALE FL 33326 US	Mailing Address S & A PROPERTY MGMT., INC P O BOX 290537 DAVIE FL 33329-0537 US
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3. Date Incorporated or Qualified 07/03/1980		
4. FEI Number 59-2188083	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75	Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00	May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 21	2a. Mailing Address 26 S & A PROPERTY MGMT, INC		
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 P.O. Box 7179		
City & State 23	City & State 28 DELRAY BEACH, FL		
Zip 24	Country 25	Zip 29 33482	Country 30 PALM BEACH

9. Name and Address of Current Registered Agent

**S. AND A. PROPERTY MANAGEMENT, INC.
7644 EAGLE POINT DRIVE
DELRAY BEACH FL 33446**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

FL

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 **EDWARD HAUBER PRESIDENT** *Edward Hauber President 1/16/98*

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WEBER, KIM		1.2 NAME	
STREET ADDRESS 424 LAKEVIEW DRIVE, #103		1.3 STREET ADDRESS	
CITY-ST-ZIP FT. LAUDERDALE FL		1.4 CITY-ST-ZIP	
TITLE VP	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME LOWEN, SCOTT		2.2 NAME	
STREET ADDRESS 430 LAKEVIEW DRIVE #101		2.3 STREET ADDRESS	
CITY-ST-ZIP FT. LAUDERDALE FL		2.4 CITY-ST-ZIP	
TITLE P	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME FRIDOVICH, EDWARD		3.2 NAME	
STREET ADDRESS 440 LAKEVIEW DRIVE #203		3.3 STREET ADDRESS	
CITY-ST-ZIP FT. LAUDERDALE FL		3.4 CITY-ST-ZIP	
TITLE ST	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MURRAY, THOMAS		4.2 NAME	
STREET ADDRESS 428 LAKEVIEW DRIVE, APT. 201		4.3 STREET ADDRESS	
CITY-ST-ZIP FT. LAUDERDALE FL		4.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SHEKKWON, GONG		5.2 NAME	
STREET ADDRESS 434 LAKEVIEW DR #104		5.3 STREET ADDRESS	
CITY-ST-ZIP FT. LAUDERDALE FL		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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, or on an attachment with an address.

SIGNATURE: *Edward Fridovich president 1/16/98*

CR2E037 (10/97)