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NONPROFIT CORPORATION ANNUAL REPORT



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

1996

**SIGNATURE:** 

**DOCUMENT #** 

763381

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THE RACQUET CLUB OF DEER CREEK II CONDOMINIUM, I NC.

Principal Place of Business Mailing Address % GLORIDA J. JACOBSON % GLORIDA J. JACOBSON POST OFFICE BOX 7044 POST OFFICE BOX 7044 **BOCA RATON FL 33431 BOCA RATON FL 33431** 3. Date Incorporated or Qualified 3a. Date of Last Report 04/05/1995 05/21/1982 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2271451 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees Zip Country Zio Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 29 30 Florida Statutes 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 KELLEY, GLORIA J. Street Address (P.O. Box Number is Not Acceptable) 82 2200 N. FEDERAL HWY. #228C 83 **BOCA RATON FL 33431** 84 City Zio Code 85 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agoni and title if application (NOTE: Registered Agent signature required when reinstahing) CR2E037 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13 12. DELETE 11 TITLE Change ■ Addition TITLE BALL, LYNN B NAME 1.2 NAME 119 DEERCREEK RD #N206 STREET ADDRESS 13 STREET ADDRESS DEERFIELD BCH FL Orty-St-ZiP 14 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE ZOELLER, INGE 2.2 NAME NAME 7572 SIERRA DRIVE E 2.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 2 4 CITY - ST-ZIP CITY - ST - ZIP STIT DELETE Addition 3.1 TITLE ☐ Change TITLE PAPPOU, CHRIS NAME 3.2 NAME 820 WEST OAKLAND PARK BLVD 3.3 STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 34 CITY-ST-ZIP CITY - ST - ZIP DELETE ☐ Change ☐ Addition TITLE 41 TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY-ST-ZIP CITY - ST - 2IF Add-tion DELETE 5.1 TiTLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 54 CITY - ST - ZIP CITY-ST-ZIP Addition ☐ DEL ETE ☐ Change 6 1 TITLE TIFLE NAME 62 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - S1 - 7IP CH1Y-S1-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 13 if changed, or on an attachment with an address.

> YM B. AW BY AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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