## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## Mar 30, 2007 8:00 am Secretary of State

03-30-2007 90126 004 \*\*\*\*61.25

**FILED** 

## **DOCUMENT #766265**

RACQUET CLUB VILLAGE APARTMENTS AT BONAVENTURE 1EAST CONDOMINIUM ASSOCIATION,



INC Principal Place of Business Mailing Address C/O CONSOLIDATED COMMUNITY MANAGEMENT, INC. C/O CONSOLIDATED COMMUNITY MANAGEMENT, INC. 10034 W. MCNAB ROAD 10034 W. MCNAB ROAD TAMARAC, FL 33321 TAMARAC, FL 33321 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01222007 Chq-NP CR2E037 (12/06) City & State City & State 4. FEI Number 59-2323038 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CONSOLIDATED COMMUNITY MANAGEMENT, INC. EISINGER, BROWN, LEWIS & FRANKEL, P.A. 10034 W. MCNAB ROAD / ATTN: Dennis J. Eisinger, Esquire TAMARAC, FL 33321 4000 Hollywood Boulevard, Suite 265-S Hollywood 33021 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. 3/15/07 SIGNATURE (NOTE: Registered Apent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Due by May 1, 2007 Trust Fund Contribution Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Delete ☐ Change ☐ Addition TITLE TITLE SANTIAGO, MARITZA NAME 153 LAKEVIEW DR #201 STREET ADDRESS STREET ADDRESS WESTON, FL 33326 CITY-ST-ZIP CJTY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE COOPER, WENDIS NAME NAME 151 LAKEVIEW DR #204 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WESTON, FL 33326 CITY-ST-ZIP VPD TITLE ☐ Delete ☐ Change ☐ Addition HARPER, JOHN NAME NAME 151 LAKEVIEW DR #105 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WESTON, FL 33326 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition CASTILLO, RAUL NAME NAME 159 LAKEWIEW DR #202 STREET ADDRESS STREET ADDRESS WESTON, FL 33326 CITY-ST-7IP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE FELDMAN, ANDREW 155 LAKEVIEW DR #204 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WESTON, FL 33326 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 it 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 of the corporation or the receiver or trustee empowered to execute this report as required by changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE**