

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2002 8:00 am
Secretary of State

02-24-2002 90041 027 ****61.25

DOCUMENT # 767845

1. Entity Name
BONAVENTURE TENNIS ASSOCIATION, INC.

Principal Place of Business

**C/O MAX SCHWARTZ
 390 LAKEVIEW DR
 WESTON FL 33326**

Mailing Address

**C/O MAX SCHWARTZ
 390 LAKEVIEW DR
 WESTON FL 33326**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

390 LAKEVIEW DR.

Suite, Apt. #, etc.

APT 62-101

City & State

WESTON FL

Zip

33326

Country

BROWARD

3. Mailing Address

390 LAKEVIEW DR

Suite, Apt. #, etc.

APT 62-101

City & State

WESTON

Zip

33326

Country

BROWARD

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**BLUMENTHAL, SYLVIA
 16300 GOLF CLUB RD.
 FT. LAUDERDALE FL 33326**

7. Name and Address of New Registered Agent

Name **BLUMENTHAL, SYLVIA**

Street Address (P.O. Box Number is Not Acceptable)
16300 GOLF CLUB RD.

City **Weston**

FL

Zip Code **33326**

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.

SIGNATURE **[Signature]**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE **VP** ☒ Delete
 NAME **ADLER, MARJORIE**
 STREET ADDRESS **338 FAIRWAY CIRCLE**
 CITY-ST-ZIP **FT LAUDERDALE FL 33326**

TITLE **P** ☐ Delete
 NAME **FRIEDMAN, JOSEPH**
 STREET ADDRESS **16300 GOLF CLUB RD**
 CITY-ST-ZIP **WESTON FL 33326**

TITLE **D** ☐ Delete
 NAME **SCHWARTZ, ERNEST**
 STREET ADDRESS **380 RACQUET CLUB RD APT 104**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33326**

TITLE **T** ☐ Delete
 NAME **SCHWARTZ, MAX**
 STREET ADDRESS **390 LAKEVIEW DR**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33326**

TITLE **S** ☐ Delete
 NAME **REFKIN, BEVERLY**
 STREET ADDRESS **16300 GOLF CLUB RD**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33326**

TITLE **D** ☐ Delete
 NAME **BLUMENTHAL, SYLVIA**
 STREET ADDRESS **16300 GOLF CLUB RD**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33326**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VP** ☐ Change ☒ Addition
 NAME **SAPERSTEIN, MIKKI**
 STREET ADDRESS **414 VILLAGE LAKE DR.**
 CITY-ST-ZIP **WESTON FL 33326**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☒ Change ☐ Addition
 NAME **SCHWARTZ, ERNEST**
 STREET ADDRESS **380 RACQUET CLUB RD APT 104**
 CITY-ST-ZIP **WESTON FL 33326**

TITLE **T** ☒ Change ☐ Addition
 NAME **SCHWARTZ, MAX**
 STREET ADDRESS **390 LAKEVIEW DR APT. 62-101**
 CITY-ST-ZIP **WESTON FL 33326**

TITLE **S** ☒ Change ☐ Addition
 NAME **REFKIN, BEVERLY**
 STREET ADDRESS **16300 GOLF CLUB RD**
 CITY-ST-ZIP **WESTON FL 33326**

TITLE **D** ☒ Change ☐ Addition
 NAME **BLUMENTHAL, SYLVIA**
 STREET ADDRESS **16300 GOLF CLUB RD.**
 CITY-ST-ZIP **WESTON FL 33326**

12. 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 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: **[Signature] MAX SCHWARTZ** **2/5/02 954 384-1727**

CR2E037 (9/01)