

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2003 8:00 am
Secretary of State

02-24-2003 90971 046 ****61.25

DOCUMENT # 767845

1. Entity Name

BONAVENTURE TENNIS ASSOCIATION, INC.



Principal Place of Business

**390 LAKEVIEW DR
APT 62-101
WESTON FL 33326**

Mailing Address

**390 LAKEVIEW DR
APT 62-101
WESTON FL 33326**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

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

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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:

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME **V SAPERSTEIN, MIKKI** ☐ Delete
STREET ADDRESS **4140 VILLAGE LAKE DR**
CITY-ST-ZIP **FT LAUDERDALE FL 33326**

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

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

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

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

TITLE
NAME **D REGAL, SEYMOUR** ☐ Change ☒ Addition
STREET ADDRESS **16650 BLATT BLVD.**
CITY-ST-ZIP **WESTON FL 33326**

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

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

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

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

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

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

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:

Max Schwartz **MAX SCHWARTZ** 2/21/03 954 384-1727

CR2E037 (10/02)