

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04655

FILED
Mar 27, 2009
Secretary of State

Entity Name: LAVER'S RESORT & RACQUET CLUB "B" CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

778 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 33442 US

New Principal Place of Business:

Current Mailing Address:

778 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 33442 US

New Mailing Address:

FEI Number: 59-2756627

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALOMBI, GARY
778 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 33442 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: INGLES, JOHN
Address: 955 EGRET CIRCLE, # 201
City-St-Zip: DELRAY BEACH, FL 33444

Title: VP () Delete
Name: TEGLER, CHRISTINE
Address: 955 EGRET CIRCLE, # 209
City-St-Zip: DELRAY BEACH, FL 33444

Title: T () Delete
Name: RAISS, RENZO
Address: 955 EGRET CIR# 510
City-St-Zip: DELRAY BEACH, FL 33444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPS (X) Change () Addition
Name: TEGLER, CHRISTINE
Address: 955 EGRET CIRCLE, # 209
City-St-Zip: DELRAY BEACH, FL 33444

Title: T (X) Change () Addition
Name: RAISS, RENZO
Address: 955 EGRET CIR# 508
City-St-Zip: DELRAY BEACH, FL 33444

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY PALOMBI

RA

03/27/2009

Electronic Signature of Signing Officer or Director

Date