


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2008 8:00 am
Secretary of State

02-12-2008 90021 014 ****61.25

DOCUMENT # N11829
 1. Entity Name
SAN REMO GOLF & TENNIS CLUB CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
 C/O J&C PROPERTY MANAGEMENT 10191 W SAMPLE ROAD, STE 203 POMPANO BEACH FL 33065
 C/O J&C PROPERTY MANAGEMENT 10191 W SAMPLE ROAD, STE 203 POMPANO BEACH FL 33065



2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.
 3. Mailing Address Suite, Apt. #, etc.

1st MOORE CR2E037 (10/07)

City & State Zip Country

4. FEI Number **59-2689798**
 Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
CALDERAZZO, JAMES
C/O J & L PROPERTY MANAGEMENT
10191 WEST SAMPLE ROAD
CORAL SPRINGS FL 33065

7. Name and Address of New Registered Agent
 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 _____ DATE _____
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature req. used when reinstating)

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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

TITLE NAME	VP LIVINGSTON, WILMA	<input type="checkbox"/> Delete
STREET ADDRESS	5200 E. CLUB CIRCLE, #103	
CITY- ST- ZIP	BOCA RATON FL 33487	
TITLE NAME	P SIMKO, JOHN	<input type="checkbox"/> Delete
STREET ADDRESS	301 CLUB CIR #204	
CITY- ST- ZIP	BOCA RATON FL 33487	
TITLE NAME	TD BARRETTA, SANTO	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	301 CLUB CIR #210	
CITY- ST- ZIP	BOCA RATON FL 33487	
TITLE NAME	S SOUHOTIS, JUDY	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	300 E CLUB CIRCLE	
CITY- ST- ZIP	BOCA RATON FL 33487	
TITLE NAME	D ASKE, JHN	<input type="checkbox"/> Delete
STREET ADDRESS	5151 E CLUB CIRCL E	
CITY- ST- ZIP	BOCA RATON FL 33487	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	Schnoll, Frank	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	350 CLUB CIRCLE #201	
CITY- ST- ZIP	BOCA RATON FL 33487	
TITLE NAME	Qualitiera Marylou	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	350 CLUB CIRCLE #101	
CITY- ST- ZIP	BOCA RATON FL 33487	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY- ST- ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY- ST- ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY- ST- ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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: _____ **FEB. 4, 2008** **161-241-8161**