

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90274 023 ****70.00

DOCUMENT # N18044

1. Entity Name
RYDER CUP VILLAS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
300 AVE OF CHAMPIONS
PALM BEACH GARDENS, FL 33418

Mailing Address
300 AVE OF CHAMPIONS
PALM BEACH GARDENS, FL 33418

14010528



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04182005

Chg-NP

CR2E037 (10/03)

City & State

City & State

4. FEI Number

59-2833790

Applied For

Not Applicable

Zip

Country

Zip

Country

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

QUEEN, SUSAN M.
300 AVE OF THE CHAMPIONS
PLM BCH GARDENS, FL 33418

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

Filing Fee is \$61.25
Due by May 1, 2005

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 SD ☐ Delete
NAME PURDY, CAROLYN
STREET ADDRESS 300 AVE OF CHAMPIONS
CITY-ST-ZIP PALM BEACH GARDENS, FL 33418

TITLE ☐ Change ☒ Addition
NAME **VP Jon Paulos**
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME GANZ, ISABEL
STREET ADDRESS 300 AVENUE OF CHAMPIONS
CITY-ST-ZIP WEST PALM BEACH, FL 33415

TITLE ☐ Change ☒ Addition
NAME **D Joe Murphy**
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME SILVER, SHARKEN
STREET ADDRESS 300 AVE OF THE CHAMPIONS
CITY-ST-ZIP WEST PALM BEACH, FL 33415

TITLE ☐ Change ☒ Addition
NAME **D Cathy Hamm**
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☒ Delete
NAME SUKENIK, RICHARD
STREET ADDRESS 300 AVE OF THE CHAMPIONS
CITY-ST-ZIP PALM BCH GARDENS, FL 33418

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

TITLE T ☐ Delete
NAME ISSACS, JIM
STREET ADDRESS 300 AVE OF THE CHAMPIONS
CITY-ST-ZIP PLM BCH GARDENS, FL 33418

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

TITLE V ☐ Delete
NAME CALLANAN, BILL
STREET ADDRESS 300 AVENUE OF THE CHAMPIONS
CITY-ST-ZIP PALM BEACH GARDENS, FL 33418

TITLE ☒ Change ☐ Addition
NAME **P**
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #