Entity Name: BOCA RATON BATH & TENNIS CLUB, INC.

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

C/O HAWK-EYE MANAGEMENT, LLC 1800 NW CORPORATE BLVD SUITE 200 BOCA RATON, FL 33431

Current Mailing Address:

DOCUMENT# 737246

C/O HAWK-EYE MANAGEMENT, LLC 1800 NW CORPORATE BLVD SUITE 200 BOCA RATON, FL 33431 US

FEI Number: 59-1732094

Name and Address of Current Registered Agent:

LARRY E. SCHNER, P.A. SACHS SAX CAPLAN, P.L. 6111 BROKEN SOUND PARKWAY NW SUITE200 BOCA RATON, FL 33487 US

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	BRIAN REISS		04/20/202
	Electronic Signature of Registered Agent		Date
Officer/Dire	ctor Detail :		
Title	PRESIDENT	Title	VP
Name	REISS, BRIAN	Name	FLIPPO, ROBERT
Address	C/O HAWK-EYE MANAGEMENT, LLC 1800 NW CORPORATE BLVD SUITE 200	Address	C/O HAWK-EYE MANAGEMENT, LLC 1800 NW CORPORATE BLVD SUITE 200
City-State-Zip:	BOCA RATON FL 33431	City-State-Zip:	BOCA RATON FL 33431
Title	SECRETARY	Title	TREASURER
Name	BOVE, BRITNEY	Name	HAMMER, DAVID
Address	C/O HAWK-EYE MANAGEMENT, LLC 1800 NW CORPORATE BLVD SUITE 200	Address	C/O HAWK-EYE MANAGEMENT, LLC 1800 NW CORPORATE BLVD SUITE 200
City-State-Zip:	BOCA RATON FL 33431	City-State-Zip:	BOCA RATON FL 33431
Title	DIRECTOR	Title	DIRECTOR
Name	AVERBOOK, DEBBIE	Name	COOLEY, ELLIS
Address	C/O HAWK-EYE MANAGEMENT, LLC 1800 NW CORPORATE BLVD SUITE 200	Address	C/O HAWK-EYE MANAGEMENT, LLC 1800 NW CORPORATE BLVD SUITE 200
City-State-Zip:	BOCA RATON FL 33431	City-State-Zip:	BOCA RATON FL 33431
Title	DIRECTOR		
Name	CRUZAN, DAVID		
Address	C/O HAWK-EYE MANAGEMENT, LLC 1800 NW CORPORATE BLVD SUITE 200		
City-State-Zip:	BOCA RATON FL 33431		

I hereby 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 all other like empowered.

SIGNATURE: BRITNEY BOVE

SECRETARY

04/20/2022

FILED Apr 20, 2022 Secretary of State 2829116181CC

Certificate of Status Desired: No