FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 723755 (5)

1. Corporation Name

BONAVIDA CONDOMINIUM ASSOCIATION, INC

Principal Place of Business

20100 WEST COUNTRY CLUB DRIVE
BAY HARBOR FL 33180

Mailing Address

C/O D.C.I
2901 SIMMS ST
HOLLYWOOD FL 33020
US

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

3. Date Incorporated or Qualified: 06/28/1972

3a. Date of Last Report: 05/01/1995

4. FEI Number: 13-2753715 — ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☐ No

9. **Name and Address of Current Registered Agent**

D.C.I.
C/O A. MEYROWITZ
2901 SIMMS STREET
HOLLYWOOD FL 33020

10. **Name and Address of New Registered Agent**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	GROSSMAN, ARTHUR	
STREET ADDRESS	20100 WEST COUNTRY CLUB DRIVE	
CITY-ST-ZIP	NORTH MIAMI BEACH FL	
TITLE	D	☐ DELETE
NAME	KATUS, DAVID	
STREET ADDRESS	20100 W. COUNTRY CLUB DR.	
CITY-ST-ZIP	N. MIAMI BEACH FL	
TITLE	S	☐ DELETE
NAME	SZITA, BLANCHE	
STREET ADDRESS	20100 W COUNTRY CLUB DR	
CITY-ST-ZIP	NO MIAMI BCH FL	
TITLE	T	☐ DELETE
NAME	STARR, REUBEN	
STREET ADDRESS	20100 W COUNTRY CLUB DR	
CITY-ST-ZIP	NO MIAMI BCH FL	
TITLE	VPD	☐ DELETE
NAME	RASKIN, ABRAHAM	
STREET ADDRESS	20100 W COUNTRY CLUB DR	
CITY-ST-ZIP	NO MIAMI BCH FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Reuben Starr REUBEN STARR TREASURER 1/17/96 305-931-2950

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (12/95)