

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90018 030 ****61.25

DOCUMENT # 740165

1. Entity Name
VILLAS OF BONAVENTURE AT BONAVENTURE 40 WEST
CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
WEST BROWARD PROP MGMT
11530 STATE RD 84
DAVIE, FL 33325 US

Mailing Address
WEST BROWARD PROP MGMT
11530 STATE RD 84
DAVIE, FL 33325 US

04037771



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01092004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-1913631

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

WEST BROWARD COMMUNITY MANAGEMENT
11530 STATE RD 84
DAVIE, FL 33325

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, 2004**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete
WILBER, RICHARD
303 IVY LN
WESTON, FL 33326

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete
MARSHALL FRIEDMAN
303 IVY LANE #7
WESTON, FL 33326
☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete
PD
WEIMER, STEVE
391 IVY LANE #1
WESTON, FL 33326

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete
KAREN WESTER FIELD
301 IVY LANE #19
WESTON, FL 33326
☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete
VP
KAUFER, ALLAN
327 IVY LANE #14
FORT LAUDERDALE, FL 33326

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete
S
SMITH, ROBIN
16351 CAMMI LANE
FT. LAUDERDALE, FL

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete
D
HELIG, BEATRICE
307 IVY LN
WESTON, FL 33326

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete
D
SANTORO, GENE
375 IVY LN
WESTON, FL 33326

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

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 #

04/17/04