

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Dec 07, 2006
Secretary of State

DOCUMENT# 747084

Entity Name: BUILDING SIX OF COUNTRY CLUB APARTMENTS AT BONAVENTURE 32 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

16251 GOLF CLUB ROAD
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 267422
WESTON, FL 33326

New Mailing Address:

FEI Number: 59-1920127 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PHEONIX MANAGMENT SERVICES
4780 NORTH STATE ROAD 7
SUITE E-250
LAUDERDALE LAKES, FL 33315 US

Name and Address of New Registered Agent:

PHEONIX MANAGMENT SERVICES
4800 NORTH STATE ROAD 7
SUITE 105
LAUDERDALE LAKES, FL 33319 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: SHELDON GOLDBERG, PHOENIX MANAGEMENT

12/07/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LANE, BILLIE
Address: 16251 GOLF CLUB RD. APT. 303
City-St-Zip: WESTON, FL 33326

Title: DP () Delete
Name: CESLJAREVIC, OLIVERA
Address: 16251 GOLF CLUB ROAD, # 313
City-St-Zip: WESTON, FL 33326

Title: P () Delete
Name: SWINFORD, BONNIE
Address: 16251 GOLF CLUB ROAD
City-St-Zip: WESTON, FL 33326

Title: DT () Delete
Name: OLIVERO, MICHAEL
Address: 16251 GOLF CLUB RD
City-St-Zip: WESTON, FL 33326

Title: DD () Delete
Name: BOOKMAN, STAN
Address: 16251 GOLF CLUB ROAD
City-St-Zip: WESTON, FL 33320

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CESLJAREVIC, OLIVERA

DP

12/07/2006

Electronic Signature of Signing Officer or Director

Date