2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Jan 30, 2004 8:00 am Secretary of State

<u> </u>							
1. Entity Name	MENT # 748613 F BONNIE BAY HOMEOWI		_	01-30-2004 90	-	°61.25	
6456 BONNIE BAY CIRCLE PO B		Mailing Address PO BOX 1248 PINELLAS PARK, FL 33780-1248				15723	181 B1 1891
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01122004 Chg	-NP CR2	2E037 (10/03)	
City & State		City & State		4. FEI Number 59-1961304			ptied For t Applicable
Zip	Country	Zip	Country	5. Certificate of Statu		\$8.75 Addi	
	6. Name and Address of Current			7. Name and Addre			
MOCOEV	SAULTIANA C		Name				
MCGOEY, WILLIAM F. 6456 BONNIE BAY CIRCLE PINELLAS PARK, FL 33781-4811		·	Street Address		t Acceptable)	· ·	•
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	77444,12 00701 3071						
			City			Zip Code	•
						FL Zip Code	
	named entity submits this statement for tions of registered agent. Signature, typed or printed name of registered agent		·		e State of Florida.	FL	and accept
the obligat	tions of registered agent.		istered office or regis		e State of Florida. I	FL I am familiar with, a	
the obligat	Signature, typed or printed name of registered agent Filling Fee is \$61.25	end title if applicable. (NOTE: Reg 9. Election Campai Trust Fund Cont	istered office or regis	uired when reinstating)	e State of Florida. I D. Make c Florida De	ATE	o ate
the obligat	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2004	end title if applicable. (NOTE: Reg 9. Election Campai Trust Fund Cont	istered office or regis	sized when reinstating) \$5.00 May Be Added to Fees	e State of Florida. I D. Make c Florida De	ATE	o ate
SIGNATURE . 10. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent Filing Fee is \$61.25 Due by May 1, 2004 OFFICERS AND DIF DS HOBBS, BARBARA 6350 BONNIE BAY CIR	9. Election Campai Trust Fund Cont BECTORS Delete	pistered office or regis	sized when reinstating) \$5.00 May Be Added to Fees	e State of Florida. I D. Make c Florida De	ATE Theck payable to epartment of St D DIRECTORS IN	o ate
TIO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent Filing Fee is \$61.25 Due by May 1, 2004 OFFICERS AND DIF DS HOBBS, BARBARA 6350 BONNIE BAY CIR PINELLAS PARK, FL 33781 DP ALDRIDGE, LORETTA J 6364 BONNIE BAY CIRCLE	9. Election Campai Trust Fund Cont BECTORS Delete Delete Delete	jistered office or regis	sized when reinstating) \$5.00 May Be Added to Fees	e State of Florida. I D. Make c Florida De	ATE check payable to epartment of St D DIRECTORS IN Change	o aite 10 Addition
TIO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent Filing Fee is \$61.25 Due by May 1, 2004 OFFICERS AND DIF DS HOBBS, BARBARA 6350 BONNIE BAY CIR PINELLAS PARK, FL 33781 DP ALDRIDGE, LORETTA J 6364 BONNIE BAY CIRCLE PINELLAS PARK, FL 33781480 VD GUYETTE, PETER L 6435 BONNIE BAY CIRCLE	9. Election Campai Trust Fund Cont BECTORS Delete Delete Delete	istered office or regis	sized when reinstating) \$5.00 May Be Added to Fees	e State of Florida. I Make c Florida De	ATE check payable to epartment of St D DIRECTORS IN Change	10 Addition

12. I hereby certify that the information supplied with this filling 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

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME ...

☐ Delete

Delete

SIGNATURE:

BERGER, SANDRA K

GROVES, BONNIE

6362 BONNIE BAY CIR

PINELLAS PARK, FL 33781

6439 BONNIE BAY CIRCLE

PINELLAS PARK, FL 337814810

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Change

☐ Addition

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2004 Not-For-Profit Corporation Annual Report Page 2

Additional Director:

George Weigl 6384 71st St Pinellas Park, FL 33781