

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769801

FILED
Jan 13, 2010
Secretary of State

Entity Name: VILLAS OF BONAVENTURE AT BONAVENTURE 23 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O POINTE MANAGEMENT GROUP, INC
75 NE 6 AVE, STE. 206
DELRAY BEACH, FL 33483 US

New Principal Place of Business:

Current Mailing Address:

C/O POINTE MANAGEMENT GROUP, INC
75 NE 6 AVE, STE. 206
DELRAY BEACH, FL 33483 US

New Mailing Address:

FEI Number: 59-2532580 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ERIC ESTEBANEZ
C/O POINTE MANAGEMENT GROUP INC
75 NE 6 AVE, STE 206
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P
Name: FOUGHT, MARY
Address: 445-4 LAKEVIEW DRIVE
City-St-Zip: WESTON, FL 33326

Title: VP
Name: WINNIE, DANIEL
Address: 447-5 LAKEVIEW DRIVE
City-St-Zip: WESTON, FL 33326

Title: T
Name: IVEY, JERRY
Address: 451-2 LAKEVIEW DRIVE
City-St-Zip: WESTON, FL 33326

Title: S
Name: ARANGO, DINA
Address: 447-2 LAKEVIEW DRIVE
City-St-Zip: WESTON, FL 33326

Title: D
Name: SCISM, MARION
Address: 445-3 LAKEVIEW DRIVE
City-St-Zip: WESTON, FL 33326

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: ERIC ESTEBANEZ

RA

01/13/2010

Electronic Signature of Signing Officer or Director

Date