

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001509

FILED  
Apr 13, 2012  
Secretary of State

**Entity Name:** SAN MIRAGE AT BONITA SPRINGS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

265 AIRPORT RD S  
NAPLES, FL 34104

**New Principal Place of Business:**

**Current Mailing Address:**

C/O R&P PROPERTY MANAGEMENT  
265 AIRPORT RD S  
NAPLES, FL 34104

**New Mailing Address:**

**FEI Number:** 35-2250557

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

R&P PROPERTY MANAGEMENT  
265 AIRPORT RD S  
NAPLES, FL 34104 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: STD  
Name: HARRELL, MARY C  
Address: 8880 COLONNADES CT W #415  
City-St-Zip: BONITA SPRINGS, FL 34125

Title: PD  
Name: BROWN, BOB  
Address: 8880 COLONNADES COURT # 414  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VPD  
Name: HICKS, RONALD  
Address: 3500 CANDLEBERRY COURT  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D  
Name: CONTICELLI, ROBERT  
Address: 8960 COLONNADES COURT #921  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D  
Name: NICHOLS, ROBERT  
Address: 8920 COLONNADES COURT #517  
City-St-Zip: BONITA SPRINGS, FL 34135

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: BOB BROWN

PD

04/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date