

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37778

FILED
Feb 18, 2012
Secretary of State

Entity Name: BONITA BEACH IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

26420 HICKORY BLVD
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

PO BOX 3175
BONITA SPRINGS, FL 34133

New Mailing Address:

FEI Number: 59-6154997

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINSTON, CHURCH
26420 HICKORY BLVD
BONITA SPRINGS, FL 34134 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: PRES
Name: CHURCH, WINSTON
Address: 26420 HICKORY BLVD
City-St-Zip: BONITA SPRINGS, FL 34134

Title: TREA
Name: RUELLE, HEIKE
Address: 6008 CAJEPUT LN.
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VP
Name: ARNAL, NEIL
Address: 27670 HICKORY BLVD
City-St-Zip: BONITA SPRINGS, FL 34134

Title: SEC
Name: CALABRESA, DENNIS
Address: 26532 HICKORY BLVD
City-St-Zip: BONITA SPRINGS, FL 34134

Title: BD
Name: BERGERT, RHEA
Address: 26371 HICKORY BLVD #40
City-St-Zip: BONITA SPRINGS, FL 34134

Title: BD
Name: HILLGROVE, SARA
Address: 25815 HICKORY BLVD #2
City-St-Zip: BONITA SPRINGS, FL 34134

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: HEIKE RUELLE

TREA

02/18/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date