SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

> Mailing Address ----

NONPROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9300003526

BONNEVILLE PINES HOMEOWNERS ASSOCIATION, INC.

ORLANDO FL 32826			3. Date incorporated or Qualified	
US			08/05/1993	
**			4. FEI Number	Applied For
			59-3231583	Not Applicable
2. Principal Place of Business . 2a. Mailing Address		5. Certificate of Status Desired \$8.75 Additional		
21 11929 E. Colonial Dr.	Colonial Dr. 28 11929 E. Colonial Dr.		Fee Required	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		Election Campaign Financing	\$5.00 May Be
22 Suite 322	27 Suite 322		Trust Fund Contribution Added to Fees	
City & State		7. Is this nonprofit corporation a homeowners association? Xes		
Zip Country	Zip	Country	8. This corporation owes or has paid the c	urrent year Intangible
24 32826 25 USA	32826 3	<i>a USA</i> −	Personal Property Tax due June 30.	☐ Yes ☑ No
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent	
81 Name Donna J. Ciccketti				
VERSTRATE, ANDREW J. 82 Street Address (P.O. Box Number is Not Acceptable)				
13831 GLASSER AVE	2426 Rodrow Ar.			
ORLANDO FL 32828				
	84 City Originato FL 85 Zip Code 32826			
11. Pursuant to the provisions of sections 617,0502 and 617,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am farging with add to compare the purpose of changing its registered agent. I am farging with a pulp state of the purpose of changing its registered agent. I am farging with a pulp state of the purpose of changing its registered agent. I am farging with a pulp state of the purpose of changing its registered agent. I am farging with a pulp state of the purpose of changing its registered agent. I am farging with a pulp state of the purpose of changing its registered agent. I am farging with a pulp state of the purpose of changing its registered agent. I am farging with a pulp state of the purpose of changing its registered agent. I am farging with a pulp state of the purpose of changing its registered agent. I am farging with a pulp state of the pulp state				
SIGNATURE SIGNATURE 21498				18
Signature, typed or printed name of registered agent and this it applicable. (NOTE: Registered Agent signature required when reinstating) DATE				
12.	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
TITLE TD	DELET e	1,1 TITLE P/1		Change 🗵 Addition
NAME ROUSCH, HAROLD			NUA J. CICCKETTI	·
STREET ADDRESS 2442 RADNER AVE.			26 RADNOR AV.	
CITY-ST-ZIP ORLANDO FL		1.4 CITY-ST-ZIP	LANDO FL 32826	
TITLE PD	DELETE	2.1 TITLE V	D .	Change Addition
NAME VERSTRATE, ANDREW	7	2.2 NAME	HN MARK AUSTIN	
STREET ADDRESS 13831 GLASSER AVE		2.3 STREET ADDRESS 2.00	DO DONEGAN DLACE	
CITY-ST-ZIP OPLANDO FL		2.4 CITY-ST-ZIP	RLANDO FC 32826	
TITLE D	DELETE	3.1 TITLE	D	Change Addition
NAME WILSON, ANDREW	~	3.2 NAME 10.11	ANG BROOKSHIRE	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changes or on an attachment with an address.

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4 CITY-ST-ZIP

4,1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP TITLE

CITY-ST-ZIF

TITLE

NAME

TITLE

NAME

2036 DONEGAN AVE

13631 GLASSER AVE

BOTEZHO, MICHAEL

2131 DONEGAN PLACE

ORLANDO FL

ORLANDO FL

ORLANDO FL

Warner, Janet

Donna J. Ciccket

2008 DONEGAN PRACE

13759 GLASSER AVE

EDWARD CORRADO 2220 DONEGAN PLACE

DONEGAN DEACE

ORLANDO FL 32826

KEVIN MCKINNEY

<u>ORUANDO</u>

a313

ORUANDO

ROBERT NAST

Change Addition

Addition |

Addition

Change

Change

FILED

Jul 30 1998 8:00am

Secretary of State



University Woods

Hem 13.

Additional Director

Steven worms

13843 Glasser Ave. Orlando FL 32826

Addition