2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State
02-20-2002 90124 024 ****61.25

DOCUMENT # 742195

Entity Name

VILLAS OF BONAVENTURE AT BONAVENTURE 41 CONDOMIN IUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
530 ST RD 84 AVIE FL 33325 S	P.O BOX 551390 DAVIE FL 33325 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-1913102 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WEST BROWARD PROPERTY MGMT-ANGELA FIORE
11530 STATE RD 84
DAVIE FL 33325

7. Name and Address of New Registered Agent

Name: WEST BROWARD Community MANAGEMENT
Street Address (P.O. Box Number is Not Acceptable): 11530 STATE ROAD 84
City: DAVIE FL Zip Code: 33325

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: SALVATORE FIORE, PRES. DATE: 2-4-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TLE / AME / TREET ADDRESS / TY-ST-ZIP	SD GOLDBERG, GEORGE 16175 LAUREL DR FORT LAUDERDALE FL 33326	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TLE / AME / TREET ADDRESS / TY-ST-ZIP	TD SWARTZ, ROBERT 16167 LAUREL DR FORT LAUDERDALE FL 33326	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TLE / AME / TREET ADDRESS / TY-ST-ZIP	VD BERNSTEIN, DAN 16209 LAUREL DR. FT LAUDERDALE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TLE / AME / TREET ADDRESS / TY-ST-ZIP	PD BASSEN, SY 16273 LAUREL DR FT LAUDERDALE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TLE / AME / TREET ADDRESS / TY-ST-ZIP	TD GOLDBERG, GEORGE 16175 LAUREL DRIVE FT. LAUDERDALE FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TLE / AME / TREET ADDRESS / TY-ST-ZIP	D SOLOMON, ALAN 16189 LAUREL DR FORT LAUDERDALE FL 33326	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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

SIGNATURE: SIGNATURE REQUIRED 2/4/02 472-3820
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #