

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2005 8:00 am
Secretary of State

02-14-2005 90047 004 ****61.25

DOCUMENT # N97000004217

1. Entity Name
**BOLLETTIERI RESORT VILLAS CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business
**2262 GULF GATE DR
SARASOTA, FL 34231**

Mailing Address
**2262 GULF GATE DR
SARASOTA, FL 34231**



2. Principal Place of Business

3. Mailing Address

4301 32nd St. W.

4301 32nd St. W.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Ste A-20

Ste A-20

01132005 Chg-NP CR2E037 (10/03)

City & State

City & State

Bradenton, FL

Bradenton, FL

4. FEI Number
65-0777863

Applied For
Not Applicable

Zip
34205

Country
USA

Zip
34205

Country
USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THOMPSON, STEPHEN W ESQ
PORGES, HAMLIN, KNOWLES & PROUTY, PA
1205 MANATEE AVENUE WEST
BRADENTON, FL 34205**

Name
C+S Condominium Management

Street Address (P.O. Box Number is Not Acceptable)
4301 32nd St. W. Ste. A-20

City
Bradenton

FL Zip Code
34205

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**STD
WAXENBERG, ZELDA
3608 59TH DRIVE WEST #
BRADENTON, FL 34210** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
COLIN, PATRICE
3608 59TH DRIVE WEST # 101
BRADENTON, FL 34210** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
BAERWALDT, RACHEL
3608 59TH DRIVE WEST
BRADENTON, FL 34210** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
3405 54th Dr. W. # 101 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Maxine Baerwaldt
3405 54th Dr. W. # 103** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: *X Maxine Baerwaldt*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/05
Date

Daytime Phone #