

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740165

FILED
Mar 30, 2009
Secretary of State

Entity Name: VILLAS OF BONAVENTURE AT BONAVENTURE 40 WEST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

391 IVY LANE
WESTON, FL 33326 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 266334
WESTON, FL 33326 US

New Mailing Address:

FEI Number: 59-1913631

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAN HOVEN, ARTHUR
391 IVY LANE
WESTON, FL 33326 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: PD () Delete
Name: KNIGHT, HAMISH S
Address: 16365 CAMMI LANE
City-St-Zip: WESTON, FL 33326

Title: VD () Delete
Name: CAREATHERS, ROCHELLE
Address: 315 IVY LANE
City-St-Zip: WESTON, FL 33326

Title: TD () Delete
Name: WEIMER, STEVE
Address: 335 IVY LANE
City-St-Zip: WESTON, FL 33326 US

Title: SD () Delete
Name: VAN HOVEN, ARTHUR
Address: 391 IVY LANE
City-St-Zip: WESTON, FL 33326 US

Title: D () Delete
Name: BABITZ, BEN
Address: 16355 CAMMI LANE
City-St-Zip: WESTON, FL 33326

Title: D () Delete
Name: DEMARTA, SERENA
Address: 16361 CAMMI LANE
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CAREATHERS, ROCHELLE
Address: 315 IVY LANE
City-St-Zip: WESTON, FL 33326

Title: VD (X) Change () Addition
Name: DIAZ, AMADO
Address: 375 IVY LANE
City-St-Zip: WESTON, FL 33326

Title: TD (X) Change () Addition
Name: WILBER, DICK
Address: 303 IVY LANE
City-St-Zip: WESTON, FL 33326 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MARSHALL, FRIEDMAN
Address: 363 IVY LANE
City-St-Zip: WESTON, FL 33326

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROCHELLE CAREATHERS

P/D

03/30/2009

Electronic Signature of Signing Officer or Director

Date