

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 733439

**Entity Name:** TOWNHOUSE VILLAGE AT BONAVENTURE 40 EAST  
CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2900 GLADES CIRCLE  
SUITE 1150  
WESTON, FL 33327

**Current Mailing Address:**

C/O TALLFIELD ASSOCIATES  
PO BOX 266192  
WESTON, FL 33326 US

**FEI Number:** 59-1804290

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BAKALAR & ASSOCIATES  
12472 WEST ATLANTIC BLVD.  
CORAL SPRINGS, FL 33071 US

*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:** LEONARD WILDER

04/29/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name ACKBAR-MORAIS, CISLYN  
Address PO BOX 266192  
City-State-Zip: WESTON FL 33326

Title TREASURER  
Name AUBRY, GESSY  
Address PO BOX 266192  
City-State-Zip: WESTON FL 33326

Title PRESIDENT  
Name FOGELSON, BRIAN  
Address C/O TALLFIELD ASSOCIATES  
PO BOX 266192  
City-State-Zip: WESTON FL 33326

Title VP  
Name POWERS, IAN  
Address C/O TALLFIELD ASSOCIATES  
PO BOX 266192  
City-State-Zip: WESTON FL 33326

*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:** BRIAN FOGELSON

**PRESIDENT**

04/29/2018

Electronic Signature of Signing Officer/Director Detail

Date