

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 740165

**Entity Name:** VILLAS OF BONAVENTURE AT BONAVENTURE 40 WEST  
CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**C/O TPMG  
2645 EXECUTIVE PARK DRIVE 127  
WESTON, FL 33331**Current Mailing Address:**C/O TPMG  
2645 EXECUTIVE PARK DRIVE 127  
WESTON, FL 33331 US**FEI Number:** 59-1913631**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MILBERG KLEIN,P.L.  
5550 GLADES RD  
500  
BOCA RATON, FL 33431 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:** PAUL MILBERG

03/01/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	SECRETARY
Name	EDREI , ALEXANDER
Address	C/O TPMG 2645 EXECUTIVE PARK DR. 127
City-State-Zip:	WESTON FL 33331

Title	DIRECTOR
Name	VANHOVEN, ARTHUR
Address	C/O TPMG 2645 EXECUTIVE PARK DR. 127
City-State-Zip:	WESTON FL 33331

Title	PRESIDENT
Name	SILVA, MONICA
Address	C/O TPMG 2645 EXECUTIVE PARK DR. 127
City-State-Zip:	WESTON FL 33331

Title	TREASURER
Name	ZOLL, MIA
Address	C/O TPMG 2645 EXECUTIVE PARK DR. 127
City-State-Zip:	WESTON FL 33331

Title	DIRECTOR
Name	CALVO , JAIME
Address	C/O TPMG 2645 EXECUTIVE PARK DR. 127
City-State-Zip:	WESTON FL 33331

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:** MONICA SILVA

PRESIDENT

03/01/2022

Electronic Signature of Signing Officer/Director Detail

Date