## 2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 748613** 

Entity Name: VILLAS OF BONNIE BAY HOMEOWNERS ASSOCIATION, INC

**FILED** Oct 15, 2018 **Secretary of State** CC8031273996

## **Current Principal Place of Business:**

5901 US HWY 19 SUITE 7Q

NEW PORT RICHEY, FL 34652

# **Current Mailing Address:**

5901 US HWY 19 SUITE 7Q NEW PORT RICHEY, FL 34652 US

FEI Number: 59-1961304 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

NEW PORT RICHEY FL 34652

QUALIFIED PROPERTY MANAGEMENT 5901 US HWY 19 SUITE 7Q NEW PORT RICHEY, FL 34652 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: MARY BURNARD 10/15/2018

> Date Electronic Signature of Registered Agent

> > City-State-Zip:

NEW PORT RICHEY FL 34652

#### Officer/Director Detail:

City-State-Zip:

Title **PRESIDENT** Title VΡ

Name ZAJAC, WALLACE Name NORWOOD, LYDIA 5901 US HWY 19 5901 US HWY 19 Address Address

SUITE 7Q SUITE 7Q

City-State-Zip: NEW PORT RICHEY FL 34652 City-State-Zip: NEW PORT RICHEY FL 34652

Title Title **TREASURER SECRETARY** Name SCHNEIDER, GABRIELE Name DAVIS, SHARON Address 5901 US HWY 19 Address 5901 US HWY 19

SUITE 7Q SUITE 7Q

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.

10/15/2018 SIGNATURE: WALLACE ZAJAC **PRESIDENT**