

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755915

Entity Name: BONITA ISLE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**8130 HAVASU COURT
LAKE WORTH, FL 33467**Current Mailing Address:**P.O. BOX 541332
LAKE WORTH, FL 33454-1332 US**FEI Number:** 59-2150221**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KRONYK & LEMME, PLLC
777 SOUTH FLAGLER DRIVE
WEST TOWER SUITE 800
WEST PALM BEACH, FL 33401 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:** THERESA LEMME

02/16/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GONZALEZ, JUAN
Address 8472 BONITA ISLE DRIVE
City-State-Zip: LAKE WORTH FL 33467

Title VICE PRESIDENT
Name WHITWORTH, WADE GLENN JR.
Address 5442 ALTA WAY
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name RICKETTS, ROBERT
Address 5451 ALTA WAY
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY
Name LOCKEN, MARGARET
Address 8317 BONITA ISLE DR
City-State-Zip: LAKE WORTH FL 33467

Title TREASURER
Name STRAUSS, ADRIANA
Address 8585 BONITA ISLE DRIVE
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name GEIL, RICHARD
Address 8454 BONITA ISLE DRIVE
City-State-Zip: LAKE WORTH FL 33467

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: MARGARET LOCKEN

SECRETARY

02/16/2017

Electronic Signature of Signing Officer/Director Detail

Date