

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 757000

**FILED**  
**Apr 25, 2017**  
**Secretary of State**  
**CC9428758977****Entity Name:** FAIRWAYS AT BONAVENTURE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**C/O CASTLE MANAGEMENT, LLC  
12270 SW 3RD STREET SUITE 200  
PLANTATION, FL 33325**Current Mailing Address:**C/O CASTLE MANAGEMENT, LLC  
12270 SW 3RD STREET, SUITE 200  
PLANTATION, FL 33325 US**FEI Number:** 59-2107197**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BROUGH, CHADROW & LEVINE  
1900 NORTH COMMERCE PARKWAY  
WESTON, FL 33326 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:** DAVID BROUGH, ESQ.**04/25/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name CROMPTON, ANN  
Address 12270 SW 3RD STREET  
City-State-Zip: PLANTATION FL 33325

Title VP  
Name LE MARIER, PATRICIA  
Address 2270 SW 3RD STREET  
City-State-Zip: PLANTATION FL 33325

Title PRESIDENT  
Name PECORELLA, LORENZO  
Address 12270 SW 3RD STREET  
City-State-Zip: PLANTATION FL 33325

Title TREASURER  
Name ALTO, THOMAS  
Address 12270 SW 3RD STREET  
City-State-Zip: PLANTATION FL 33325

Title DIRECTOR  
Name MANZO, ENRIQUE  
Address 12270 SW 3RD STREET  
City-State-Zip: PLANTATION FL 33325

Title DIRECTOR  
Name CHAVES, RICARDO  
Address 12270 SW 3RD STREET  
City-State-Zip: PLANTATION FL 33325

Title DIRECTOR  
Name WEISMAN, EDWARD  
Address 12270 SW 3RD STREET  
City-State-Zip: PLANTATION FL 33321

Title DIRECTOR  
Name STRAUSS, JOANNE  
Address 12270 SW 3RD STREET  
City-State-Zip: PLANTATION FL 33325

*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:** LORENZO PECORELLA**PRESIDENT****04/25/2017**

Electronic Signature of Signing Officer/Director Detail

Date