

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04847

Entity Name: BONAIRE AT WOODMONT NO. 4, INC.**Current Principal Place of Business:**7707 N.W. 79 AVE.
TAMARAC, FL 33321**Current Mailing Address:**C/O MOODY ACCOUNTING SERVICES
160 S UNIVERSITY DR SUITE E
PLANTATION, FL 33324**FEI Number:** 59-2463489**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BROUGH, CHADROW, AND LEVINE P.A.
2149 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P
Name	BARAKAT, RUSS
Address	7579 NW 79 AVENUE, #307
City-State-Zip:	TAMARAC FL 33321

Title	VP
Name	KUBY, SEENA
Address	7579 NW 79 AVE #301
City-State-Zip:	TAMARAC FL 33321

Title	TR
Name	PEPE, BRIGIDA
Address	7579 NW 79 AVENUE, #303
City-State-Zip:	TAMARAC FL 33321

Title	SEC
Name	PEARCE, MINERVA
Address	7579 NW 79TH AVE. #108
City-State-Zip:	TAMARAC FL 33321

Title	OFFICER
Name	PASSANO, LINDA
Address	7579 NW 79TH AVE, #102
City-State-Zip:	TAMARAC FL 33321

Title	OFFICER
Name	KAHANE, STEPHEN
Address	7547 NW 79TH AVE, #315
City-State-Zip:	TAMARAC FL 33321

Title	OFFICER
Name	UZODINMA, NNERA
Address	7547 NW 79TH AVE, #310
City-State-Zip:	TAMARAC FL 33321

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: RUSS BARAKAT**PRESIDENT****04/25/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date