

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07041

**Entity Name:** BONITA BAY COMMUNITY ASSOCIATION, INC.

**FILED**  
**Mar 20, 2014**  
**Secretary of State**  
**CC9454731311**

**Current Principal Place of Business:**

3531 BONITA BAY BOULEVARD  
SUITE 200  
BONITA SPRINGS, FL 34134

**Current Mailing Address:**

3531 BONITA BAY BOULEVARD  
SUITE 200  
BONITA SPRINGS, FL 34134 US

**FEI Number: 59-2497446**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

BECKER & POLIAKOFF, P.A.  
12140 CARISSA COMMERCE COURT  
SUITE 200  
FORT MYERS, FL 33966 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 RUSSELL, LAWRENCE  
Address 4200 SANCTUARY WAY  
City-State-Zip: BONITA SPRINGS FL 34134

Title V  
Name MCKENZIE, ROD  
Address 26000 OSPREY NEST CT  
City-State-Zip: BONITA SPRINGS FL 34134

Title S  
Name ECKRICH, DAVID  
Address 26201 SIENNA DR  
City-State-Zip: BONITA SPRINGS FL 34134

Title T  
Name PALMER, JACK  
Address 26350 WOODLYN DR  
City-State-Zip: BONITA SPRINGS FL 34134

Title D  
Name MOHL, BRUCE  
Address 26998 MONTEGO POINTE CT #201  
City-State-Zip: BONITA SPRINGS FL 34134

*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: LINDA SKAIFE (CAM) FOR LAWRENCE RUSSELL, PRESIDENT**

**03/20/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date