

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000000308

Entity Name: BONITA SPRINGS DOWNTOWN ALLIANCE INC.

Current Principal Place of Business:

27310 OLD 41 RD
BONITA SPRINGS, FL 34135

Current Mailing Address:

P.O. BOX 367553
BONITA SPRINGS, FL 34136 US

FEI Number: 81-1385933

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JAMES , MAGNUS
8841 WEST TERRY STREET
BONITA SPRINGS, FL 34135 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: JAMES MAGNUS

02/26/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP, DIRECTOR
Name SAYGER, SUSIE
Address 27515 OLD 41 ROAD
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name MAGNUS, JAMES
Address 8841 WEST TERRY STREET
City-State-Zip: BONITA SPRINGS FL 34135

Title SECRETARY, DIRECTOR
Name WHITTEMORE, BONNIE
Address 25151 FAIRWAY DUNES CT
City-State-Zip: BONITA SPRINGS FL 34135

Title TREASURER, DIRECTOR
Name BELLAMY, LEE
Address 27750 OLD 41 RD
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name LEONARD, TRISH
Address 9148 BONITA BEACH RD #201
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name MORAN, KYLE
Address 27317 FELTS
City-State-Zip: BONITA SPRINGS FL 34135

Title PRESIDENT, DIRECTOR
Name GIBSON, MIKE
Address 27310 OLD 41 RD
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name LEROUX, SOPHIE
Address 10530 WILSON ST
City-State-Zip: BONITA SPRINGS FL 34135

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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: JAMES C MAGNUS

DIRECTOR

02/26/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KELBER, CANDICE
Address 27313 OLD 41 RD
SUITE #3
City-State-Zip: BONITA SPIRNGS FL 34135

Title DIRECTOR
Name BAKER, PEGGY
Address 27657 OLD 41 RD
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name ALYONA, USHE A
Address 26100 OLD 41 RD
City-State-Zip: BONITA SPRINGS FL 34135