### 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42559

Entity Name: CENTER FOR THE ARTS OF BONITA SPRINGS, INC.

FILED
May 10, 2019
Secretary of State
0775114346CC

# **Current Principal Place of Business:**

26100 OLD 41 ROAD BONITA SPRINGS, FL 34135

## **Current Mailing Address:**

26100 OLD 41 ROAD

BONITA SPRINGS. FL 34135 US

FEI Number: 65-0295085 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

RICHARDSON, RALPH A 27725 OLD 41 ROAD SUITE 104 BONITA SPRINGS, FL 33923 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	CHAIRMAN	Title	Ρ

Name THOMSON, DONALD Name BRIDGES, SUSAN A

Address 3451 BONITA BAY BLVD #206 Address 9786 TREASURE CAY LANE

City-State-Zip: BOITA SPRINGS FL 34134 City-State-Zip: BONITA SPRINGS FL 34135

TitleTREASURERTitleSECRETARYNameWEINMAN, FREDNameRUSSIAN, AMY

Address 26790 S TAMIAMI TRL Address 25330 GOLDCREST DR.

City-State-Zip: BONITA SPRINGS FL 34134 City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR Title CHAIRMAN, PAST

Name NESI, MARY Name MCCURDY, JACQUELINE

Address 22933 FOREST EDGE CT Address 3070 GREENFLOWER COURT

City-State-Zip: BONITA SPRINGS FL 34135 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: SUSAN A BRIDGES

Electronic Signature of Signing Officer/Director Detail

PRESIDENT 05/10/2019

Date