

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000004047

**Entity Name:** A. JOHN BONO, P.A., LLC

**Current Principal Place of Business:**

5555 NORTH OCEAN BLVD.,  
SUITE 26  
LAUDERDALE BY THE SEA, FL 33308

**Current Mailing Address:**

5555 NORTH OCEAN BLVD.,  
SUITE 26  
LAUDERDALE BY THE SEA, FL 33308

**FEI Number:** 61-1605380

**Certificate of Status Desired:** Yes

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

CARL G. SANTANGELO & ASSOCIATES, P.A.  
3000 NORTH FEDERAL HIGHWAY  
BLDG. 2, SUITE 200  
FORT LAUDERDALE, FL 33306 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

**Authorized Person(s) Detail :**

Title MGRM  
Name BONO, A. JOHN  
Address 5555 NORTH OCEAN BLVD., SUITE 26  
City-State-Zip: LAUDERDALE BY THE SEA FL 33308

Title MGRM  
Name BARTLETT, NANCY M  
Address 5555 NORTH OCEAN BLVD. SUITE 26  
City-State-Zip: LAUDERDALE BY THE SEA FL 33308

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** A. JOHN BONO

**PRESIDENT**

**04/25/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date