

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721097

FILED
Apr 27, 2009
Secretary of State

Entity Name: BONEFISH TOWERS CONDOMINIUM, INC.

Current Principal Place of Business:

2000 COCO PLUM DRIVE
MARATHON, FL 33050

New Principal Place of Business:

Current Mailing Address:

2000 COCO PLUM DRIVE
MARATHON, FL 33050

New Mailing Address:

FEI Number: 59-1641175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF P.A.
121 ALHAMBRA PLAZA
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BERRY, RON
Address: P.O. BOX 10888
City-St-Zip: JONESBORO, GA 30237

Title: D () Delete
Name: COOPER, LARRY
Address: 58127 DIENER DR
City-St-Zip: GOSHEN, IN 46528

Title: S () Delete
Name: JONES, TOM
Address: 2000 COCO PLUM DR, # 804
City-St-Zip: MARATHON, FL 33050

Title: D () Delete
Name: SANT, JOHN
Address: 200 CORA PLUM DR 305
City-St-Zip: MARATHON, FL 33050

Title: V () Delete
Name: KANE, KENNETH
Address: 45860 E MEADOWS CIRCLE
City-St-Zip: MACOMB, MI 48044

Title: D () Delete
Name: WRIGHT, PHOEBE
Address: 2000 COCO PLUM DR, # 1004
City-St-Zip: MARATHON, FL 33050

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JONES, TOM
Address: 8675 RIVER BLUFF LN.
City-St-Zip: ROSWELL, GA 30076

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: KORNIENKO, GEORGE
Address: 2000 COCO PLUM DR, # 703
City-St-Zip: MARATHON, FL 33050

Title: D (X) Change () Addition
Name: SANT, JOHN
Address: 200 COCO PLUM DR 305
City-St-Zip: MARATHON, FL 33050

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS JONES

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date