

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727585

FILED
Jan 30, 2008
Secretary of State

Entity Name: BONITA SPRINGS - ESTERO ASSOCIATION OF REALTORS, INC.

Current Principal Place of Business:

25300 BERNWOOD DRIVE STE.#1
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

Current Mailing Address:

25300 BERNWOOD DRIVE STE.#1
BONITA SPRINGS, FL 34135 US

New Mailing Address:

FEI Number: 59-1708371

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHUMANN, RAY
27200 RIVERVIEW CENTER BLVD
SUITE 703
BONITA SPRINGS, FL 34135 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: M () Delete
Name: MACAULEY, BILL
Address: 25300 BERNWOOD DRIVE STE.#1
City-St-Zip: BONITA SPRINGS, FL 34135

Title: SD () Delete
Name: HOOK, PENNY
Address: 25300 BERNWOOD DRIVE STE.#1
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VD () Delete
Name: HAAS, SHERRY
Address: 25300 BERNWOOD DRIVE STE. #1
City-St-Zip: BONITA SPRINGS, FL 34135

Title: PD () Delete
Name: SCARTZ, JAMES
Address: 25300 BERNWOOD DRIVE STE. #1
City-St-Zip: BONITA SPRINGS, FL 34135

Title: TD () Delete
Name: MORTON, DAVID
Address: 25300 BERNWOOD DRIVE STE. #1
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: OLSEN, PAMELA
Address: 25300 BERNWOOD DRIVE STE.#1
City-St-Zip: BONITA SPRINGS, FL 34135

Title: PD (X) Change () Addition
Name: HAAS, SHERRY
Address: 25300 BERNWOOD DRIVE STE. #1
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VD (X) Change () Addition
Name: PAVICH, JOSEPH SR.
Address: 25300 BERNWOOD DRIVE STE. #1
City-St-Zip: BONITA SPRINGS, FL 34135

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: BILL MACAULEY

M

01/30/2008

Electronic Signature of Signing Officer or Director

Date