2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#731654

FILED Feb 02, 2009 Secretary of State

Entity Name: BONAIRE VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 14580 BONAIRE BLVD DELRAY BEACH, FL 33446 **Current Mailing Address: New Mailing Address:** 14580 BONAIRE BLVD DELRAY BEACH, FL 33446 FEI Number: 59-1579426 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GERSTIN, JOSHUA ESQ **GERSTIN & ASSOCIATES** 1499 W. PALMETTO PARK RD, STE 412 BOCA RATON, FL 33486 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: SVP () Delete () Change () Addition URDANG, GEORGE Name: Name: 14720 BONAIRE BLVD Address: Address: City-St-Zip: DELRAY BEACH, FL 33446 City-St-Zip: Title: () Delete Title: () Change () Addition WILDER, GILBERT Name: Name: Address: 14527 BONAIRE BLVD SUITE 208 Address: City-St-Zip: DELRAY BEACH, FL 33446 City-St-Zip: Title: () Delete Title: () Change () Addition MULLLEN, ROBERT Name: Name: 14527 BONAIRE BLVD. # 408 Address: Address: City-St-Zip: DELRAY BEACH, FL 33446 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SPARK, CARLETON Name: 14623 BONAIRE BLVD #108 Address: Address: City-St-Zip: DELRAY BEACH, FL 33446 City-St-Zip: Title: () Delete Title: () Change () Addition TERK, JACOB Name: Name: 14527 BONAIRE BLVD #608 Address: Address: City-St-Zip: DELRAY BEACH, FL 33446 City-St-Zip: Title: () Delete Title: () Change () Addition FINE, RICK Name: Name: Address: 14623 BONAIRE BLVD #101 Address: DELRAY BEACH, FL 33446 City-St-Zip: 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: CARLETON SPARK P 02/02/2009