

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733439

FILED
Feb 05, 2010
Secretary of State

Entity Name: TOWNHOUSE VILLAGE AT BONAVENTURE 40 EAST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2045 SW 127 AVE
DAVIE, FL 33325 US

New Principal Place of Business:

1750 UNIVERSITY DR
#205
CORAL SPRINGS, FL 33071 US

Current Mailing Address:

1750 UNIVERSITY DR, 205
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 59-1804290 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GLAZER AND ASSOCIATES, P.A.
3113 STIRLING ROAD
201
HOLLYWOOD, FL 33312 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: PD
Name: FOGELSON, BRIAN
Address: 2045 SW 127 AVE.
City-St-Zip: DAVIE, FL 33325

Title: D
Name: GLADIOLA, MOSHE
Address: 2045 SW 127 AVE
City-St-Zip: DAVIE, FL 33325

Title: VPD
Name: POWERS, IAN
Address: 2045 SW 127 AVE
City-St-Zip: DAVIE, FL 33325

Title: TD
Name: FALK, ERIC
Address: 2045 SW 127 AVE.
City-St-Zip: DAVIE, FL 33325

Title: D
Name: MONTEIRO, HORACIO
Address: 2045 SW 127 AVE
City-St-Zip: DAVIE, FL 33325

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: BRIAN FOGELSON

PD

02/05/2010

Electronic Signature of Signing Officer or Director

Date