


**FILED**  
**Feb 28, 2005 8:00 am**  
**Secretary of State**

01-20-2005 90035 031 \*\*\*\*61.25

**2005 NOT-FOR-PROFIT CORPORATION  
 ANNUAL REPORT**

**DOCUMENT # 746317**  
 1. Entity Name  
**BUILDING EIGHT OF COUNTRY CLUB APARTMENTS AT  
 BONAVENTURE 32 CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business <b>PHOENIX MANAGEMENT        4780 N STATE RD 7, E250        LAUDERDALE LAKES, FL 33319</b>	Mailing Address <b>PHOENIX MANAGEMENT        4780 N STATE RD 7, E250        LAUDERDALE LAKES, FL 33319</b>
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**66002853**



01072005 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-1939606</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  
**PHOENIX MANAGEMENT SERVICES INC  
 4780 N STATE RD 7  
 SUITE E250  
 LAUDERDALE LAKES, FL 33319**

**DO NOT WRITE  
 IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Wendy Coates (Pres.)* DATE: *1/14/05*

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when re-registering)

**Filing Fee is \$61.25  
 Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHACE, JOHN 16401 GOLF CLUB ROAD #209 WESTON, FL 33068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COTLER, MARILYN 16401 GOLF CLUB RD #308 WESTON, FL 33068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEINSTEIN, MORIS 16401 GOLF CLUB RD, #105 WESTON, FL 33068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, HELENE 15401 GULF CLUB RD WESTON, FL 33068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT WATKINS, WENDELL 16401 GOLF CLUB RD #301 FORT LAUDERDALE, FL 33321
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
 IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Wendy Coates* DATE: *2/15/05* (534) 388-4527

SIGNATURE AND TYPED OR PRINTED NAME OF BOARDS OFFICER OR DIRECTOR