2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#759396

Apr 27, 2009 Secretary of State

Entity Name: BONITA RESORT & CLUB ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

26101 HICKORY BLVD

BONITA BEACH, FL 33923 US

Current Mailing Address: New Mailing Address:

P.O. BOX 540669

MERRITT ISLAND, FL 32954 US

FEI Number: 59-2167811 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:

PRICE, ROBERT 271 CROCKETT BLVD.

US MERRITT ISLAND, FL 32953

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

SKRIVAN, ARTHUR SKRIVAN, ARTHUR Name: Name: 25730 HICKORY BLVD, 6363C Address: 26101 HICKORY BLVD Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134

Title: () Delete Title: (X) Change () Addition BANKER, ALBERT Name: BANKER, ALBERT Name:

Address: 26881 WEDGEWOOD DR. Address: 26101 HICKORY BLVD City-St-Zip: LAKESIDE VILLA, IL 34134 City-St-Zip: BONITA SPRINGS, FL 34134

Title: VPD () Delete Title: **VPD** (X) Change () Addition Name:

BRIDGES, JIM BRIDGES, JIM Name: 114 WINESAP RD Address: Address: 26101 HICKORY BLVD City-St-Zip: PITTSFIELD, MA 01201 City-St-Zip: BONITA SPRINGS, FL 34134

Title: () Delete Title: D (X) Change () Addition

Name: MADGE, EDWARD Name: MADGE, EDWARD Address: 2601 W BROWARD BLVD Address: 26101 HICKORY BLVD City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip: BONITA SPRINGS, FL 34134

Title: () Delete Title: (X) Change () Addition

BARRIE, JAMES BARRIE, JAMES Name: Name: 24208 GIANT GULCH 26101 HICKORY BLVD Address: Address: City-St-Zip: EVERGREEN, CO 80439 City-St-Zip: BONITA SPRINGS, FL 34134

Title: () Delete Title: () Change (X) Addition

LENARD. JACQUELINE Name: Name: Address: Address: 26101 HICKORY BLVD BONITA SPRINGS, FL 34134 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: JACQUELINE LENARD STD 04/27/2009

Electronic Signature of Signing Officer or Director

Date