2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#760618

FILED Jan 30, 2009 Secretary of State

Entity Name: BONITA SPRINGS COUNTRY CLUB CIVIC ASSOCIATION INCORPORATED

Current Principal Place of Business:		New Principal Place of Business:				
	RNOUSTIE CT PRINGS, FL 3		US			
Current M	lailing Addres	ss:		New Mailing Addre	ess:	
PO BOX 3 BONITA S	67026 PRINGS, FL 3	34136	US			
El Number	: 59-2471855	FEI Nu	mber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
BEERS, JO 24781 CAF		_				
BONITA S	PRINGS, FL 3		US			
Γhe above	PRINGS, FL 3	34135		purpose of changing its register	red office or registered agent, or both,	
Γhe above	PRINGS, FL 3 named entity se of Florida. RE:	34135 submits	this statement for the			
The above n the State SIGNATUI	PRINGS, FL 3 named entity set of Florida. RE: Electron	34135 submits nic Signa		gent	Date	
The above n the State SIGNATUI	PRINGS, FL 3 named entity se of Florida. RE:	34135 submits nic Signa	this statement for the	gent		
The above n the State SIGNATUI	PRINGS, FL 3 named entity set of Florida. RE: Electron S AND DIREC	submits nic Signa TORS: Delete L JSIIE CT	this statement for the nture of Registered Aલ્	gent	Date	
The above not the State SIGNATUR DFFICER: Title: Jame: Address:	PRINGS, FL 3 named entity see of Florida. RE: Electron S AND DIRECTOR PD () BEERS, JOHN I 24781 CARNOL BONITA SPRING	submits nic Signa TORS:) Delete L JSIIE CT (GS, FL 30) Delete ERT J JSITE CT	this statement for the sture of Registered Ag	gent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR	

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: JOHN L BEERS PD 01/30/2009