

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90212 036 ****61.25

DOCUMENT # 769247

1. Entity Name
BONAIRE VILLAGE HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business
C/O A & M PROPERTY MGMT.
3475 HIATUS ROAD
SUNRISE, FL 33351

Mailing Address
C/O A & M PROPERTY MGMT.
3475 HIATUS ROAD
SUNRISE, FL 33351

94073565



2. Principal Place of Business

46 CCM
Suite, Apt. #, etc.
10034 McNab Rd

3. Mailing Address

46 CCM
Suite, Apt. #, etc.
10034 McNab Rd

City & State
TAMARAC, FL

City & State
TAMARAC, FL

Zip Country
33321

Zip Country
33321

03292004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2443449

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SHENDELL, TAMAR D ESQ
3650 N. FEDERAL HWY
#202
LIGHTHOUSE POINT, FL 33064

7. Name and Address of New Registered Agent

Name James R. Miles
Street Address (P.O. Box Number is Not Acceptable)
1003 W McNab Rd
City TAMARAC FL Zip Code 33321

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/28/04

Filing Fee is \$81.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ARIENZO, FRANK 7510 NW 79TH AVENUE O-2 TAMARAC, FL 33321	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LERNER, SOL 7570 NW 79TH AVE., W-2 TAMARAC, FL 33321	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SCHMIDT, JULIE 7650 NW 79TH AVE. #M-6 TAMARAC, FL 33321	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GIORGIANI, FRAN 7650 NW 79TH AVENUE V-2 TAMARAC, FL 33321	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SLOVEN, NEIL 7750 NW 79TH AVE. #H-9 TAMARAC, FL 33321	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FORTENBACHER, KARL 7610 NW 79TH AVE. #I-2 TAMARAC, FL 33321	☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ARIENZO, FRANK 10034 W McNab Rd TAMARAC, FL 33321	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Bider, Sam 10034 W McNab Rd TAMARAC, FL 33321	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Beach, SUSAN 10034 W McNab Rd TAMARAC, FL 33321	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GIORGIANI, FRAN 10034 W McNab Rd TAMARAC, FL 33321	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SLOVEN, NEIL 10034 W McNab Rd TAMARAC, FL 33321	☒ Change ☐ Addition

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:

John Giorganii

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/04 718-9903

DATE

Daytime Phone #