

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 23, 2009
Secretary of State

DOCUMENT# 769802

Entity Name: VILLAS OF BONAVENTURE AT BONAVENTURE 24 CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**11784 W SAMPLE RD
#103
CORAL SPRINGS, FL 33065 US**New Principal Place of Business:**10034 W. MCNAB ROAD
TAMARAC, FL 33321 US**Current Mailing Address:**11784 W SAMPLE RD
#103
CORAL SPRINGS, FL 33065 US**New Mailing Address:**10034 W. MCNAB ROAD
TAMARAC, FL 33321 US**FEI Number:** 59-2403965**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**UNITED COMMUNITY MGMT CORP.
11784 W SAMPLE RD
#103
CORAL SPRINGS, FL 33065 US**Name and Address of New Registered Agent:**CONSOLIDATED COMMUNITY MANAGEMENT
10034 W. MCNAB ROAD
TAMARAC, FL 33321 US

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: JAMES MILES

06/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: VPD () Delete
Name: CABRA, MARIA
Address: 450 LAKEVIEW DRIVE #2
City-St-Zip: WESTON, FL 33326Title: PD () Delete
Name: SHAPIRO, VERA
Address: 450 LAKEVIEW DR #2
City-St-Zip: WESTON, FL 33326Title: D () Delete
Name: MUMAW, JAMES
Address: 450 LAKEVIEW DR., #4
City-St-Zip: WESTON, FL 33326Title: D () Delete
Name: RAMDHANAS, DANNY
Address: 450 LAKEVIEW DR #1
City-St-Zip: WESTON, FL 33326**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
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: VERA SHAPIRO

P

06/23/2009

Electronic Signature of Signing Officer or Director

Date