

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J07906 (7)

1. Corporation Name

THE CENTER OF BONITA SPRINGS, INC.

Principal Place of Business

10397 SOUTHERN BOULEVARD
ROYAL PALM BEACH, FL 33411

Mailing Address

10397 SOUTHERN BOULEVARD
ROYAL PALM BEACH, FL 33411

3. Date Incorporated or Qualified
04/07/1986

3a. Date of Last Report
04/04/95

2. Principal Place of Business

21 10323 SOUTHERN BOULEVARD

2a. Mailing Address

26 10323 SOUTHERN BOULEVARD

4. FEI Number

59-2702161

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

23 ROYAL PALM BEACH, FL

City & State

28 ROYAL PALM BEACH, FL

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Zip

33411

Country

25 USA

Zip

29 33411

Country

30 USA

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ABLE, DIANE L.
10397 SOUTHERN BOULEVARD
ROYAL PALM BEACH, FL 33411

81 Name

PATRICIA BALCH

82 Street Address (P.O. Box Number is Not Acceptable)

10323 SOUTHERN BOULEVARD

83

84 City

ROYAL PALM BEACH

FL

85 Zip Code

33411

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.1505, Florida Statutes.

SIGNATURE

Patricia Balch

PATRICIA BALCH

4-25-96

Signature, typed or printed name of registered agent and date of application

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME MILLER, ROBERT L.
STREET ADDRESS 10397 SOUTHERN BOULEVARD
CITY - ST - ZIP ROYAL PALM BEACH, FL 33411 ☐ DELETE

TITLE V
NAME AUSTIN, CHRISTOPHER
STREET ADDRESS 10397 SOUTHERN BOULEVARD
CITY - ST - ZIP ROYAL PALM BEACH, FL 33411 ☐ DELETE

TITLE ST
NAME ABLE, DIANE
STREET ADDRESS 10397 SOUTHERN BOULEVARD
CITY - ST - ZIP ROYAL PALM BEACH, FL 33411 ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP ☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP ☐ Change ☐ Addition

3.1 TITLE ST
3.2 NAME BALCH, PATRICIA
3.3 STREET ADDRESS 10323 SOUTHERN BOULEVARD
3.4 CITY - ST - ZIP ROYAL PALM BEACH, FL 33411 ☒ Change ☒ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Patricia Balch

Patricia Balch

4/25/96

(407) 790-1414

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

Daytime Phone #

CR2E034 (12/95)