

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007 8:00 am
Secretary of State

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02202007 Chg-P CR2E034 (12/06)

DOCUMENT # J07906
1. Entity Name
THE CENTER OF BONITA SPRINGS, INC.



Principal Place of Business
**18745 SE FEDERAL HWY
TEQUESTA, FL 33469 US**

Mailing Address
**18745 SE FEDERAL HWY
TEQUESTA, FL 33469 US**

2. Principal Place of Business - No P.O. Box #
416 Clematis St.

3. Mailing Address
416 Clematis St.

Suite, Apt. #, etc.

City & State
West Palm Beach, FL

City & State
West Palm Beach, FL

Zip
33401

Country

4. FEI Number
59-2702161

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
**RUBENFIELD, DAREN L
18745 SE FEDERAL HWY
TEQUESTA, FL 33469**

7. Name and Address of New Registered Agent
Name
Rubinfeld, Daren
Street Address (P.O. Box Number is Not Acceptable)
416 Clematis St.
City
West Palm Beach FL Zip Code
33401

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 DATE **4/11/07**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS MILLER, ROBERT L. 18745 SE FEDERAL HWY TEQUESTA, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 416 Clematis St. West Palm Beach, FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP AUSTIN, CHRISTOPHER 18745 SE FEDERAL HWY TEQUESTA, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 416 Clematis St. West Palm Beach, FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RUBENFELD, DAREN 18745 SE FEDERAL HWY TEQUESTA, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 416 Clematis St. West Palm Beach, FL 33401
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DATE **4/11/07** Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR