

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90037 004 ***158.75

DOCUMENT # M09234

1. Entity Name
BONITA BAY PROPERTIES, INC.



Principal Place of Business
**9990 COCONUT ROAD, SUITE 200
BONITA SPRINGS, FL 34135 US**

Mailing Address
**9990 COCONUT ROAD, SUITE 200
BONITA SPRINGS, FL 34135 US**

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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02282008

Chg-P

CR2E034 (12/06)

4. FEI Number
59-2475007

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MAC'KIE, PAMELA S
9990 COCONUT ROAD, SUITE 200
BONITA SPRINGS, FL 34135**

Name **Scott R. Whitney**

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

9990 Coconut Rd. Ste 200

City **Bonita Springs**

FL

Zip Code **34135**

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 **Scott R. Whitney**

Senior Vice President

3/26/08

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 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 **V** ☒ Delete
NAME **GLEESON, JOHN M**
STREET ADDRESS **9990 COCONUT ROAD, SUITE 200**
CITY-ST-ZIP **BONITA SPRINGS, FL 34135**

TITLE **DV** ☐ Change ☒ Addition
NAME **Brian Lucas**
STREET ADDRESS **(Same address)**
CITY-ST-ZIP

TITLE **V** ☒ Delete
NAME **HUTCHCRAFT, MITCH**
STREET ADDRESS **9990 COCONUT ROAD, SUITE 200**
CITY-ST-ZIP **BONITA SPRINGS, FL 34135**

TITLE **DSV** ☐ Change ☒ Addition
NAME **Susan H. Watts**
STREET ADDRESS **(Same address)**
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **UKLEJA, LOUISE S**
STREET ADDRESS **9990 COCONUT ROAD, SUITE 200**
CITY-ST-ZIP **BONITA SPRINGS, FL 34135**

TITLE **V** ☐ Change ☒ Addition
NAME **Joseph B. Garon**
STREET ADDRESS **(Same address)**
CITY-ST-ZIP

TITLE **DC** ☐ Delete
NAME **LUCAS, DAVID**
STREET ADDRESS **9990 COCONUT ROAD, SUITE 200**
CITY-ST-ZIP **BONITA SPRINGS, FL 34135**

TITLE **V** ☐ Change ☒ Addition
NAME **Dennis L Church**
STREET ADDRESS **(Same address)**
CITY-ST-ZIP

TITLE **DP** ☐ Delete
NAME **GREEN, KATHERINE C**
STREET ADDRESS **9990 COCONUT ROAD, SUITE 200**
CITY-ST-ZIP **BONITA SPRINGS, FL 34135**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **STV** ☐ Delete
NAME **WHITNEY, SCOTT R**
STREET ADDRESS **9990 COCONUT ROAD, SUITE 200**
CITY-ST-ZIP **BONITA SPRINGS, FL 34135**

TITLE **DTV** ☒ Change ☐ Addition
NAME **Scott R. Whitney**
STREET ADDRESS **(Same address)**
CITY-ST-ZIP

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 another like empowered.

SIGNATURE: **Scott R. Whitney**

3/26/08 (239) 495-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #