

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N02000007675

1. Entity Name
THE BUENAVENTURA LAKES COMMUNITY
ASSOCIATION, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 MAY 13 AM 8:00

Principal Place of Business
3046 STILLWATER DR.
BUENAVENTURA LAKES, FL 34743

Mailing Address
3046 STILLWATER DR.
BUENAVENTURA LAKES, FL 34743



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04292004

Chg-NP

CR2E037 (10/03)

MRD

City & State

City & State

4. FEI Number
APPLIED FOR 58-2527059

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FARQUHARSON, BEULAH
3046 STILLWATER DR.
BUENAVENTURA LAKES, FL 34743

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Filing Fee is \$61.25
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 PD
NAME FARQUHARSON, BEULAH
STREET ADDRESS 3046 STILLWATER DR.
CITY-ST-ZIP BUENAVENTURA LAKES, FL 34743 ☐ Delete

TITLE VD
NAME CASTILLO, CRUZ
STREET ADDRESS 365 BUTTONWOOD DR.
CITY-ST-ZIP BUENAVENTURA LAKES, FL 34743 ☐ Delete

TITLE STD
NAME FARQUHARSON, EARLISHA
STREET ADDRESS 201 GARDENIA ST.
CITY-ST-ZIP BUENAVENTURA LAKES, FL 34743 ☐ 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Treasurer
NAME Ana Maria Mendez
STREET ADDRESS 95 ZACALO WAY
CITY-ST-ZIP Buena Ventura Lakes FL 34743 ☐ Change ☒ Addition

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

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

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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:

Beulah Farquharson
PD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/04 (407)518-8083
Date Daytime Phone #