2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004597

FILED Apr 15, 2009 Secretary of State

Entity Name: THE RESIDENCES AT BONITA VILLAGE I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

27901 BONITA VILLAGE BLVD. BONITA SPRINGS, FL 34134

Current Mailing Address: New Mailing Address:

27901 BONITA VILLAGE BLVD. BONITA SPRINGS, FL 34134

FEI Number: 43-2117128 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HENNEY, SCOTT
27901 BONITA VILLAGE BLVD
BONITA SPRINGS, FL 34134 US

GAUGHAN, GLORIA
27901 BONITA VILLAGE BLVD
BONITA SPRINGS, FL 34134 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: GLORIA GAUGHAN 04/15/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

Name:HENNEY, SCOTTName:GAUGHAN, GLORIAAddress:27901 BONITA VILLAGE BLVD.Address:27901 BONITA VILLAGE BLVD.City-St-Zip:BONITA SPRINGS, FL 34134City-St-Zip:BONITA SPRINGS, FL 34134

Title: VTD () Delete Title: VTD (X) Change () Addition

Name: GOULT, THOMAS Name: GAULT, THOMAS
Address: 37901 BONITA VILLAGE BLVD. Address: 27901 BONITA VILLAGE

Address: 37901 BONITA VILLAGE BLVD. Address: 27901 BONITA VILLAGE BLVD. City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134

Title: () Delete Title: (X) Change () Addition GAUGHAN, GLORIA Name: WILSON-DIMATIO, NANCY Name: 27961 BONITA VILLAGE BLVD 27901 BONITA VILLAGE BLVD Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134

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: DAVID LAGEMAN AGT 04/15/2009