

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 29, 2009
Secretary of State

DOCUMENT# N07000010346

Entity Name: BONITA'S COVE OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**125A INDUSTRIAL LOOP WEST
ORANGE PARK, FL 32073**New Principal Place of Business:**1712 KINGSLEY AV
SUITE 2
ORANGE PARK, FL 32073**Current Mailing Address:**P O BOX 65908
ORANGE PARK, FL 32065**New Mailing Address:****FEI Number:** 26-0246783**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**ENSELL, KURT A
125A INDUSTRIAL LOOP W
ORANGE PARK, FL 32065 US**Name and Address of New Registered Agent:**ENSELL, KURT A
1712 KINGSLEY AV
ORANGE PARK, FL 32073 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: _____

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: COLLINS, ASHLEY
Address: 3840 CROWN POINTE ROAD STE C
City-St-Zip: JACKSONVILLE, FL 32257

Title: DVP () Delete
Name: WISEMAN, WAYLAND
Address: 3840 CROWN POINTE ROAD STE C
City-St-Zip: JACKSONVILLE, FL 32257

Title: DTS () Delete
Name: KNOWLES, MARK
Address: 3840 CROWN POINTE ROAD STE C
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KURT A ENSELL

RA

04/29/2009

Electronic Signature of Signing Officer or Director

Date