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Jan 29 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N07388** (4)

1. Corporation Name

**BONAVENTURE CIVIC ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

369 LAKEVIEW DRIVE - 104  
FT. LAUDERDALE FL 33326

369 LAKEVIEW DRIVE - 104  
FT. LAUDERDALE FL 33326

3. Date Incorporated or Qualified

**01/30/1985**

4. FEI Number

**NOT APPLICABLE**

Applied For  
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

7. Is this nonprofit corporation a homeowners association?  
☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PHELPS, LAWRENCE**  
**369 LAKEVIEW DRIVE - 104**  
**FT. LAUDERDALE FL 33326**

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME MORRISON, WILLARD  
STREET ADDRESS 215 LAKEVIEW DRIVE  
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE VPDR ☐ DELETE

NAME PHELPS, LAWRENCE  
STREET ADDRESS 369 LAKEVIEW DRIVE  
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE D ☐ DELETE

NAME GREENBERG, ERWIN  
STREET ADDRESS 16063 FAIRWAY CIRCLE  
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE D ☐ DELETE

NAME GROBER, DORIS  
STREET ADDRESS 657 RACQUET CLUB RD  
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE SD ☐ DELETE

NAME CITRON, MARILYN  
STREET ADDRESS 16131 LAUREL DRIVE  
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE D ☒ DELETE

NAME ~~BURNES, SAM~~  
STREET ADDRESS ~~187 LAKEVIEW DR~~  
CITY-ST-ZIP ~~FT. LAUDERDALE FL~~

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**D. ROBERT METZGER** ☒ Change ☐ Addition

**679 RACQUET CLUB RD #1**  
**FT. LAUDERDALE FL 33326**

☐ Change ☐ Addition

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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Michael A. Morrison*

1/20/98 954-384-6823

CR2E037 (10/97)