2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 02, 2007
Secretary of State

DOCUMENT# N08708

Entity Name: BONAIRE VILLAGE AT WOODMONT NO. 2, INC.

Current Principal Place of Business:

C/O CCM
10034 W MCNAB ROAD
TAMARAC, FL 33321

New Principal Place of Business:

C/O SWIFT
1750 UNIVERSITY DR #205
CORAL SPRINGS, FL 33071

Current Mailing Address:

SWIFT MANAGEMENT SOLUTIONS, INC.
1750 UNIVERSITY DRIVE #205
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 59-2443567 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MILES, JAMES R
10034 W MCNAB ROAD
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

SWIFT, NICOLE R
1750 UNIVERSITY DR #205
CORAL SPRINGS, FL 33071 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: NICOLE SWIFT 07/02/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: FORTENBACHER, KARL
Address: 10034 W MCNAB RD
City-St-Zip: FORT LAUDERDALE, FL 33321

Title: SD ( ) Delete
Name: WILLIS, MELODI
Address: 10034 W MCNAB RD
City-St-Zip: FORT LAUDERDALE, FL 33321

Title: PD ( ) Delete
Name: BEACH, SUSAN
Address: 10034 W MCNAB RD
City-St-Zip: FORT LAUDERDALE, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: FORTENBACHER, KARL
Address: 1750 UNIVERSITY DR #205
City-St-Zip: CORAL SPRINGS, FL 33071

Title: SD (X) Change ( ) Addition
Name: WILLIS, MELODI
Address: 1750 UNIVERSITY DR #205
City-St-Zip: CORAL SPRINGS, FL 33071

Title: PD (X) Change ( ) Addition
Name: BEACH, SUSAN
Address: 1750 UNIVERSITY DR
City-St-Zip: CORAL SPRINGS, FL 33071

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: SUSAN BEACH PD 07/02/2007
Electronic Signature of Signing Officer or Director — Date