## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08708

Apr 13, 2009 Secretary of State

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

**Current Principal Place of Business:** 

**New Principal Place of Business:** 

C/O WEST BROWARD COMM. MGMT. 11530 STATE RD 84 DAVIE, FL 33325

**Current Mailing Address:** 

**New Mailing Address:** 

C/O WEST BROWARD COMM. MGMT. 11530 STATE RD 84 DAVIE, FL 33325

C/O WEST BROWARD COMM. MGMT. P O BOX 551390

DAVIE, FL 33355

FEI Number: 59-2443567

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:

FIORE, ANGELA WEST BROWARD COMM. MGMT 11530 STATE RD. 84 DAVIE, FL 33325 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete ARNETT, DOUGLAS Name: Address: City-St-Zip:

7630 NW 79 AVE. #K6 TAMARAC, FL 33321

Title: ( ) Delete WILLIS, MELODI Name: Address: 7620 NW 79 AVE. #37 City-St-Zip: TAMARAC, FL 33321

Title: () Delete BEACH, SUSAN Name: 7610 NW 79 AVE. #14 Address: City-St-Zip: TAMARAC, FL 33321

Title: ( ) Delete RUSSELL, TAMIKA Name: Address: 7640 NW 79 AVE., L3 City-St-Zip: TAMARAC, FL 33321

Title: () Delete PACETTI, CHRISTIAN Name: 7620 NW 79 AVE. J6 Address: City-St-Zip: TAMARAC, FL 33321

(X) Change ( ) Addition

ARNETT, DOUGLAS Name: Address: 7630 NW 79 AVE. #K6 City-St-Zip: TAMARAC, FL 33321

(X) Change ( ) Addition Title:

Name: WILLIS, MELODI Address: 7620 NW 79 AVE. #37 City-St-Zip: TAMARAC, FL 33321

Title: (X) Change ( ) Addition

BEACH, SUSAN Name: 7610 NW 79 AVE. #14 Address: City-St-Zip: TAMARAC, FL 33321

Title: () Change () Addition

Name: Address: City-St-Zip:

Title: (X) Change ( ) Addition

BROWN, DAWN Name: 7610 NW 79 AVE #I13 Address: City-St-Zip: TAMARAC, FL 33321

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: DOUGLAS ARNETT Ρ 04/13/2009