

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09208

FILED
Apr 06, 2011
Secretary of State

Entity Name: WILD PINES OF BONITA BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

27180 BAY LANDING DR
SUITE 4
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

Current Mailing Address:

27180 BAY LANDING DR
SUITE 4
BONITA SPRINGS, FL 34135 US

New Mailing Address:

FEI Number: 59-2730077

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STERLING PROPERTY SERVICES
27180 BAY LANDING DR
SUITE 4
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

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:

Title: DP
Name: TREFETHEN, SUE
Address: 3661 WILD PINES DR, #A-201
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D
Name: SKELLY, DON
Address: 3651 WILD PINES DR, #B-207
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VP
Name: GUARASCI, LEA
Address: 3651 WILD PINES DR, #B-205
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D
Name: HOLLENHORST, SCOTT
Address: 3641 WILD PINES DR, #C-301
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DST
Name: CULBERTSON, SCOTT
Address: 3631 WILD PINES DR, #D-205
City-St-Zip: BONITA SPRINGS, FL 34134

I hereby 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 all other like empowered.

SIGNATURE: JOHN O'GORMAN

MR.

04/06/2011

Electronic Signature of Signing Officer or Director

Date