2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2007 8:00 am
Secretary of State
04-12-2007 90036 029 ****61.25

DOCUMENT # N10086

1. Entity Name
BONITA HEIGHTS PARK COOPERATIVE, INC.

Principal Place of Business	Mailing Address
3650 BONITA BEACH RD. LOT 20 BONITA SPRINGS, FL 34134	P.O BOX 2383 BONITA SPRINGS, FL 34133-2383

400U0640

03272007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
correct	correct
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 80-0051426 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KORP, WILLIAM R 333 S. TAMIAMI TRAIL SUITE 199 VENICE, FL 34285	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SUSANNE, PFISTER 3650 BONITA BEACH RD. 20 BONITA SPRINGS, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	correct	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP SHOEMAKER, MERLENE 3650 BONITA BEACH ROAD, #27 BONITA SPRINGS, FL 34134	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TS HARMON, DONNA 3650 BONITA BEACH RD. LOT 1 BONITA SPRINGS, FL 34134	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SOLL, FRED 3650 BONITA BCH. RD. S.W. #23 BONITA SPRINGS, FL 34134	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MICHEL, JOYCE 3650 BONITA BENCH RD SW, #26 BONITA SPRINGS, FL 34134	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	✓	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donna Harmon, Sec/Treasurer 4/6/07 239-992-0678
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT 400582446

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Division of Corporations

Annual Report

Annual Report Help

Document Number
~~N10086~~

Business Entity Name
BONITA HEIGHTS PARK COOPERATIVE, INC.

FEI Number	800051426
FEI Number Status	(•) Listed Above ( ) Applied For ( ) Not Applicable
Certificate of Status Desired	( ) Yes (•) No $8.75 each
Election Campaign Financing Trust Fund Contribution	( ) Yes (•) No

Principal Place of Business

Address	3650 BONITA BEACH RD.
Suite, Apt. #, etc.	LOT 20
City, State	BONITA SPRINGS , FL
Zip Code & Country	34134

Mailing Address

Address	P.O BOX 2383
Suite, Apt. #, etc.	
City, State	BONITA SPRINGS , FL
Zip Code & Country	341332383

Name and Address of Registered Agent

Name (Last, First, Middle, Title)	KORP , WILLIAM , R ,
- OR -	
Business to serve as RA	
Address (PO Box is not acceptable)	333 S. TAMIAMI TRAIL
Suite, Apt. #, etc.	SUITE 199
City, State	VENICE , FL
Zip Code & Country	34285 US

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business

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entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes **forgery** under s.831.06, Florida Statutes.

Officer/Director Name and Address

Our database can hold up to 6 officers/directors. If more than 6 officers/directors need to be made a part of the record, you cannot file the annual report online. You will need to download an annual report and list the additional officers/directors, title(s), name, and address on an attachment.

Title: P
Name (Last, First, Middle, Title): SUSANNE , PFISTER , ,
- OR -
Entity Name to serve as Officer/Director:
Street Address: 3650 BONITA BEACH RD. 20
City, State: BONITA SPRINGS , FL
Zip Code & Country:

Title: VP
Name (Last, First, Middle, Title): SHOEMAKER , MERLENE , ,
- OR -
Entity Name to serve as Officer/Director:
Street Address: 3650 BONITA BEACH ROAD, #27
City, State: BONITA SPRINGS , FL
Zip Code & Country: 34134

Title: TS
Name (Last, First, Middle, Title): HARMON , DONNA , ,
- OR -
Entity Name to serve as Officer/Director:
Street Address: 3650 BONITA BEACH RD. LOT 1
City, State: BONITA SPRINGS , FL
Zip Code & Country: 34134

Title: D

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Name (Last, First, Middle, Title) SOLL, FRED,

- OR -

Entity Name to serve as Officer/Director

Street Address 3650 BONITA BCH. RD. S.W. #23

City, State BONITA SPRINGS, FL

Zip Code & Country 34134

Title D

Name (Last, First, Middle, Title) MICHEL, JOYCE,

- OR -

Entity Name to serve as Officer/Director

Street Address 3650 BONITA BENCH RD SW, #26

City, State BONITA SPRINGS, FL

Zip Code & Country 34134

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as Officer/Director

Street Address

City, State

Zip Code & Country

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title Secretary

Officer/Director Signature Donna Harmon

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes **forgery** under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

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