2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# N27777

Entity Name: LA BONNE VIE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1280 SW 36 AVE
301
POMPANO BEACH, FL 33069 US

New Principal Place of Business:

Current Mailing Address:

1280 SW 36 AVE
301
POMPANO BEACH, FL 33069 US

New Mailing Address:

FEI Number: 65-0071882 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RYAN, TINA
EXCLUSIVE PROPERTY MGMT, INC
1280 SW 36 AVE #301
POMPANO BEACH, FL 33069 US

Name and Address of New Registered Agent:

SHENDELL & ASSOCIATES,P.A.
3650 N. FEDERAL HWY
#202
LIGHTHOUSE POINT, FL 33069 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: TAMAR SHENDELL 04/21/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: STD ( ) Delete
Name: GREULICH, JOLENE
Address: 4600 W. MCNAB RD
City-St-Zip: POMPANO BEACH, FL 33069

Title: D ( ) Delete
Name: DOOLEY, STEPHANIE
Address: 4630 W MENAB RD
City-St-Zip: POMPANO BEACH, FL 33069

Title: PD ( ) Delete
Name: HORNE, VICTORIA
Address: 4630 W MCNAB RD
City-St-Zip: POMPANO BEACH, FL 33069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPSD (X) Change ( ) Addition
Name: GREULICH, JOLENE
Address: 4600 W. MCNAB RD C-2
City-St-Zip: POMPANO BEACH, FL 33069

Title: TD (X) Change ( ) Addition
Name: HARLEY, FREDERICA
Address: 4600 W MCNAB RD A-2
City-St-Zip: POMPANO BEACH, FL 33069

Title: PD (X) Change ( ) Addition
Name: HORNE, VICTORIA
Address: 4630 W MCNAB RD D-2
City-St-Zip: POMPANO BEACH, FL 33069

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: VICTORIA HORNE PD 04/21/2009
Electronic Signature of Signing Officer or Director Date