## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N38120

FILED Oct 30, 2009 Secretary of State

Entity Name: RESIDENT COUNCIL OF BONAIR TOWERS, INC.

Current Principal Place of Business:		New Principal Place of Business:	
1915 HALGRIM AVE. # 805		1915 HALGRIM AVE. # 508	
T. MYERS, FL 33901		FT. MYERS, FL 33901	
Current Mailing Address:		New Mailing Address:	
1915 HALGRIM AVE. # 805 FT. MYERS, FL 33901		1915 HALGRIM AVE. # 508 FT. MYERS, FL 33901	
n accordar	nce with s. 607.193(2)(b), F.S., the corporation did not receiv	<del>-</del>	ce.
lame and	d Address of Current Registered Agent:	Name and	I Address of New Registered Agent:
DELANEY, PATRICIA 1915 HALGRIM AVE. # 805 FT MYERS, FL 33901 US		BLANEY, DONALD E 1915 HALGRIM AVE. # 508 FT MYERS, FL 33901 US	
	e named entity submits this statement for the purpose e of Florida.	e of changing	its registered office or registered agent, or both,
SIGNATURE: DONALD BLANEY			10/30/2009
	Electronic Signature of Registered Agent		Date
OFFICER	S AND DIRECTORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Nddress: Dity-St-Zip:	P () Delete BLANEY, DONALD E 1915 HALGRIM AVE #508 FORT MYERS, FL 33901	Title: Name: Address: City-St-Zip:	()Change()Addition
Fitle: Name: Address: Dity-St-Zip:	VP ( ) Delete MACKEY, ANNE 1915 HALGRIM AVE #804 FORT MYERS, FL 33901	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition NONE, NONE 1915 HALGRIM AVE #508 FORT MYERS, FL 33901
itle: lame: ddress: city-St-Zip:	S () Delete NANCY, MARTIN A 1915 HALGRIM AVE #407 FORT MYERS, FL 33901	Title: Name: Address: City-St-Zip:	S (X) Change () Addition NONE, NONE 1915 HALGRIM AVE #508 FORT MYERS, FL 33901
Fitle: Name: Address: Dity-St-Zip:	T () Delete DAVIS, LWLA 1915 HALGRIM AVE. #705 FORT MYERS, FL 33901	Title: Name: Address: City-St-Zip:	T (X) Change () Addition DAVIS, LULA 1915 HALGRIM AVE. #705 FORT MYERS, FL 33901
⊺itle: Name:	P ( ) Delete GERALDINE, COMBS 1915 HALGRIM AVE #405	Title: Name: Address:	( ) Change ( ) Addition
adress: City-St-Zip:	FORT MYERS, FL 33901	City-St-Zip:	

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: DONALD BLANEY P 10/30/2009