


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 06, 2007 8:00 am**  
**Secretary of State**

04-06-2007 90026 042 \*\*\*\*61.25

<b>DOCUMENT # N40099</b> 1. Entity Name <b>THE SANCTUARY AT BONITA BAY HOMEOWNERS' ASSOCIATION, INC.</b>																																																																																																																																																			
Principal Place of Business <b>%WBG SW FLORIDA, INC.</b> <b>3461 BONITA BAY BLVD., STE. 101</b> <b>BONITA SPRINGS, FL 33134 US</b>		Mailing Address <b>%WBG SW FLORIDA, INC.</b> <b>3461 BONITA BAY BLVD., STE. 101</b> <b>BONITA SPRINGS, FL 33134 US</b>																																																																																																																																																	
2. Principal Place of Business - No P.O. Box # <b>60 STERLING PROPERTY</b> Suite, Apt. #, etc. <b>27800 OLD 41 ROAD</b> City & State <b>BONITA SPRINGS, FL</b> Zip <b>34135</b>		3. Mailing Address <b>60 STERLING PROPERTY</b> Suite, Apt. #, etc. <b>27800 OLD 41 ROAD</b> City & State <b>BONITA SPRINGS, FL</b> Zip <b>34135</b>																																																																																																																																																	
4. FEI Number <b>31-1337244</b>		Applied For <input type="checkbox"/> Not Applicable																																																																																																																																																	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>																																																																																																																																																	
6. Name and Address of Current Registered Agent  <b>O'GORMAN, JOHN</b> <b>C/O STERLING PROPERTY SRVS</b> <b>27800 OLD 41 RD</b> <b>BONITA SPRINGS, FL 34135</b>		7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>																																																																																																																																																	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																																																			
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>																																																																																																																																																	
		<b>\$5.00 May Be Added to Fees</b>																																																																																																																																																	
		<b>Make check payable to Florida Department of State</b>																																																																																																																																																	
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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.																																																																																																																																																			
<b>SIGNATURE:</b> <u>Michael L. Hanson</u> <i>1 Pac.</i> <span style="float: right;">3/14/07 239-947-8283</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																																																			

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