

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000174

FILED
Feb 21, 2011
Secretary of State

Entity Name: BONAVENTURE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

644 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 13089
TALLAHASSEE, FL 32317 US

New Mailing Address:

FEI Number: 59-3314589

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RHINEHART, ROBERT S
644 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32301 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: DAC
Name: WILSON, JUDY
Address: 1418 MILLSTREAM ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: DP
Name: KLEIN, DONALD
Address: 3060 CAMELLIAWOOD CIRCLE EAST
City-St-Zip: TALLAHASSEE, FL 32301

Title: DVP
Name: CLARKE, FAITH
Address: 3048 CAMELLIAWOOD CIRCLE EAST
City-St-Zip: TALLAHASSEE, FL 32301

Title: DS
Name: TUMMINIA, TOM
Address: 3134 CAMELLIAWOOD CIRCLE WEST
City-St-Zip: TALLAHASSEE, FL 32301

Title: DT
Name: GROSZ, MILT
Address: 3135 CAMELLIAWOOD CIRCLE WEST
City-St-Zip: TALLAHASSEE, FL 32301

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: ROBERT S RHINEHART

RA

02/21/2011

Electronic Signature of Signing Officer or Director

Date