

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005285

FILED
Apr 06, 2011
Secretary of State

Entity Name: THE VILLAGES OF BONITA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

27180 BAY LANDING DR
SUITE 4
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

Current Mailing Address:

27180 BAY LANDING DR
SUITE 4
BONITA SPRINGS, FL 34135 US

New Mailing Address:

FEI Number: 59-3421037

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STERLING PROPERTY SERVICES
27180 BAY LANDING DR
SUITE 4
BONITA SPRINGS, FL 34135 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: DS
Name: BEATON, JOHN
Address: 9640 VILLAGE VIEW BLVD, #101
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP
Name: BLANCHARD, JANET
Address: 9241 LAKE ABBEY LN, #102
City-St-Zip: BONITA SPRINGS, FL 34135

Title: P
Name: STEIL, HANK
Address: 9641 VILLIAGE VIEW BLVD, #102
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DT
Name: VANDER VEEN, MARY ANN
Address: 9610 VILLAGE VIEW BLVD, #202
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D
Name: POYNTER, TOM
Address: 9241 LAKE ABBY LN, #202
City-St-Zip: BONITA SPRINGS, FL 34135

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: JOHN O'GORMAN

MR.

04/06/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date