## **2005 NOT-FOR-PROFIT CORPORATION** ANNUAL REPORT

DOCUMENT # N9900001478

## **FILED** Apr 26, 2005 8:00 am Secretary of State 04-26-2005 90133 019 \*\*\*\*61.25

1. Entity Nam BOLERO INC.			SOCIATION,								
Principal Plac BOLERO DRI NAPLES, FL	VE	PO BO	Address 0X 10519 ES, FL 34101					4,0000	• •		
2. Principal P	Place of Business	3. Maili	ng Address			_;_					
Suite, Apt. # etc. S		Suite, Apt. #, etc.			01312005	Chg-NP	CR2E	037 (10/03)			
City & State C		City	ity & State				4. FEI Number 59-3564			<del> </del>	pplied For ot Applicable
Zip	Country	Zip		Cou	ntry			of Status Desired		\$8.75 Add	
	6. Name and Address of	Current Registered	Agent		Name		7. Name and	Address of New	Registered	Agent	
GOLDMAN, ELLEN A PORTER,WRIGHT,MORRIS & ARTHUR,LLP 5801 PELICAN BAY BLVD., SUITE 300 NAPLES, FL 34108					Name COMMUNITIES PROPERTY MENT., INC.  Street Address (P.O. Box Number is Not Acceptable)  24201 WALDEN CENTER DR.						
	• 				City	NITA	SPRING	<u> </u>	FI	L Zip Coo	1e 34
	named entity submits this stations of registered agent.  Signature speed or printed name of regis	Keit	LSY	V//	4 Xe	] =17	a /	n, in the State of	Florida. I an	familiar with	, and accept
· · · · · ·	Filing Fee is \$61.25 Due by May 1, 2005		9. Election Can Trust Fund C				\$5.00 May Be Added to Fees	) FI		k payable t	
10.	Due by May 1, 2005	AND DIRECTORS	Trust Fund C					FI	orida Depa	rtment of S	tate
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2005	AND DIRECTORS		11. TITLE NAME STREET	on.		Added to Fees	FI	orida Depa	rtment of S	tate
TITLE NAME STREET ADDRESS	OFFICERS  PD PRINCE, ROBERT 2650 BOLERO DR.	AND DIRECTORS	Trust Fund C	11. TITLE NAME STREE CITY- TITLE NAME STREE	E ET ADDRESS ST-ZIP		Added to Fees	FI	orida Depa	IRECTORS IN	tate
TIFLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD PRINCE, ROBERT 2650 BOLERO DR. NAPLES, FL 34109 VD MCKNIGHT, ALICE 2630 BOLERO DR.		Trust Fund C	11. TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE NAME STREE	E ET ADDRESS .ST-ZIP E ET ADDRESS .ST-ZIP E ET ADDRESS .ST-ZIP	PD	Added to Fees DDITIONS/CHA	FINGES TO OFFICE	CERS AND C	rtment of S  PIRECTORS IN  Change  Change	tate 1 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Due by May 1, 2005  OFFICERS  PD PRINCE, ROBERT 2650 BOLERO DR. NAPLES, FL 34109  VD MCKNIGHT, ALICE 2630 BOLERO DR. NAPLES, FL 34109  STD KAUFMAN, JAMES 2605 ESTRELLA COURT		Trust Fund C	11. IIILE NAMI STREI CHY TITLE NAME STREI STREI NAME STREI	E ET ADDRESS -ST-ZIP  E ADDRESS -ST-ZIP  E ADDRESS -ST-ZIP  E ADDRESS -ST-ZIP	PD	Added to Fees	FINGES TO OFFICE	CERS AND C	TIMENT OF S  DIRECTORS IN  Change  Change	J 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Due by May 1, 2005  OFFICERS  PD PRINCE, ROBERT 2650 BOLERO DR. NAPLES, FL 34109  VD MCKNIGHT, ALICE 2630 BOLERO DR. NAPLES, FL 34109  STD KAUFMAN, JAMES 2605 ESTRELLA COURT NAPLES, FL 34109  D RICHARDS, JOHN 2626 BOLERO DR.		Trust Fund C	11. IIILE NAME STREE CHY- IIILE NAME STREE NAME STREE NAME STREE NAME STREE	E ET ADDRESS ST-ZIP	PD KAU	EAST WAREN F	FINGES TO OFFICE	DERS AND C	Change	I 10 Addition Addition
TIFLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2005  OFFICERS  PD PRINCE, ROBERT 2650 BOLERO DR. NAPLES, FL 34109  VD MCKNIGHT, ALICE 2630 BOLERO DR. NAPLES, FL 34109  STD KAUFMAN, JAMES 2605 ESTRELLA COURT NAPLES, FL 34109  D RICHARDS, JOHN 2626 BOLERO DR. NAPLES, FL 34109  D PERRON, RALPH 2638 BOLERO DR		Delete  Delete  Delete  Delete  Delete	TITLE NAME STREE CITY	E ET ADDRESS ST-ZIP  E ET ADDRESS ST-ZIP	PD KAU 87 6 Cha DS PER JAI	EAST WAR GRIN F	FINGES TO OFFICE  TIMES  SHINGTO  ALLS, O	orida Depa CERS AND C	Change  Change  Change  Change  Change	tate  V 10  Addition  Addition  Addition  Addition  Addition

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 cath; 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.

GNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date