## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

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## FILED Mar 31, 2008 8:00 am Secretary of State

DOCUMENT # P0000044802  1. Entity Name BONITA BAY GROUP, INC.							03-31-2008	90037 00	)3 ***158	3.75
Principal Place	e of Busines	s	Mailing Address	. •						
9990 COCON BONITA SPRI			9990 COCONUT RD., SUITE 200 BONITA SPRINGS, FL 34135					· · · · · · · · · · · · · · · · · · ·		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02282008	Chg-P	CR2E0	34 (12/06)	
City & State			City & State			4. FEI Number 59-3643			<del></del>	oplied For of Applicable
Zip	Zip Country		Zip	Zip Country		5. Certificate of	f Status Desired		\$8.75 Add Fee Require	
	6. Name	and Address of Current	t Registered Agent			7. Name and	Address of New R	Registered A	Agent	
MACKIE, PAMELA S 9990 COCONUT RD. SUITE 200 BONITA SPRINGS, FL 34135  Name Street Addres  City D						Cott R. I is (P.O. Box Number		Ste.	200 Zip Cod	
					DO!	arta St	<u> </u>	FL	30	1172
			or the purpose of changing it	s registered	office or regis	stered agent, or both	n, in the State of Fig	orida. I am f	lamiliar with,	and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  Signature (NOTE: Registered Agent signature required when reinstating)										
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Added to Fees										
	ay 1, 200		.00 Trust Fund Cor		Ă	ADDITIONS/C	CHANGES TO OFF	FICERS AND	DIRECTOR	S IN 11
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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 rube 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 607, 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.

Whitney

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF AGNING OFFICER OR DIRECTO

126/07 (239) 49 S- 100 Dayling Phone #