



FILED
Apr 03, 2007 8:00 am
Secretary of State

04-03-2007 90019 037 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P01000046971 1. Entity Name BONITA ACQUISITIONS, INC.		
Principal Place of Business 3791 BAY CREEK DR BONITA SPRINGS, FL 34134	Mailing Address 8010 SUMMERLIN LAKES DRIVE 200 33907, FL 33919	
DO NOT WRITE IN THIS SPACE		 01052007 No Chg-P CR2E034 (11/05)
		4. FEI Number 59-3715575 Applied For <input type="checkbox"/> Not Applicable
6. Name and Address of Current Registered Agent AMATO, LOUIS X 801 LAUREL OAK DR, STE 615 NAPLES, FL 34108		DO NOT WRITE IN THIS SPACE
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 _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FISCHER, CHARLOTTE G 3791 BAY CREEK DR BONITA SPRINGS, FL 34134	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FISCHER, STANLEY 3491 BAY CREEK DR 3791 Bay Creek Dr. BONITA SPRINGS, FL 34134	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		
DO NOT WRITE IN THIS SPACE		
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 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.		
SIGNATURE: <i>Charlotte X Fischer</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date <i>3/21/07</i> Daytime Phone # <i>239 495 0607</i>