


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 29, 2008 8:00 am
Secretary of State

08-29-2008 90002 045 ***150.00

DOCUMENT # P06000063869

1. Entity Name
BONNIN GROUP VENTURES, INC



Principal Place of Business
**645 W. 23RD STREET
 PANAMA CITY, FL 32405**

Mailing Address
**645 W. 23RD STREET
 PANAMA CITY, FL 32405**

2. Principal Place of Business - No P.O. Box #
2310 S Hwy 77 STE 110

3. Mailing Address
2310 S Hwy 77

Suite, Apt. #, etc.
STE 110

Suite, Apt. #, etc.
STE 110

City & State
Lynn Haven, FL

City & State
Lynn Haven, FL

Zip
32444

Zip
32444

Country

Country



05022008 Chg-P CR2E034 (12/06)

4. FEI Number
20-4839972

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**BONNIN, MARY J
 7519 LITTLETON RD
 PANAMA CITY, FL 32404**

7. Name and Address of New Registered Agent
 Name
Mary J Bonnin
 Street Address (P.O. Box Number is Not Acceptable)
2310 S. Hwy 77
STE 110
 City
LYNN HAVEN FL Zip Code
32444

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 *M. J. Bonnin* DATE 5-18-08

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	<input type="checkbox"/> Delete BONNIN, MARY J 7519 LITTLETON RD PANAMA CITY, FL 32404	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	2310 S. Hwy 77 STE 110 Lynn Haven, FL 32444
TITLE VP	<input type="checkbox"/> Delete BONNIN, MARK V 7519 LITTLETON RD PANAMA CITY, FL 32404	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	2310 S. Hwy 77 STE 110 LYNN HAVEN, FL 32444
TITLE S/T	<input type="checkbox"/> Delete BONNIN, MICHAEL D 7519 LITTLETON RD PANAMA CITY, FL 32404	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	2310 S Hwy 77 STE 110 LYNN HAVEN, FL 32444
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *M. J. Bonnin* DATE 5-18-08 DAYTIME PHONE (850) 265-3011

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #