# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 09, 2012**
**Secretary of State**

DOCUMENT# P08000024414

**Entity Name:** BONNET SHORES GP, INC.

**Current Principal Place of Business:**

430 HARTSELL AVENUE
LAKELAND, FL 338154502

**New Principal Place of Business:**

**Current Mailing Address:**

430 HARTSELL AVENUE
LAKELAND, FL 338154502

**New Mailing Address:**

**FEI Number: 26-2289695** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SAXON, BERNICE S. ESQ.
201 E. KENNEDY BLVD., STE. 600
C/O SAXON, GILMORE, CARRAWAY, GIBBONS, LAS
TAMPA, FL 33602 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: PRES
Name: STEVENSON, BENJAMIN
Address: 430 HARTSELL AVENUE
City-St-Zip: LAKELAND, FL 33815 US

Title: VP
Name: CALCAGNI, JOHN
Address: 430 HARTSELL AVENUE
City-St-Zip: LAKELAND, FL 33815

Title: DIR
Name: LYON, BRUCE
Address: 430 HARTSELL AVENUE
City-St-Zip: LAKELAND, FL 33815

Title: DIR
Name: VREELAND, J. KYLE
Address: 430 HARTSELL AVENUE
City-St-Zip: LAKELAND, FL 33815

Title: DIR
Name: COPELAND, BEVERLY
Address: 430 HARTSELL AVENUE
City-St-Zip: LAKELAND, FL 33815

Title: DIR
Name: PIMENTEL, MICHAEL
Address: 430 HARTSELL AVENUE
City-St-Zip: LAKELAND, FL 33815

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BENJAMIN STEVENSON PRES 04/09/2012

Electronic Signature of Signing Officer or Director — Date