

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000051232

Entity Name: BONITA TWINS, INC

**FILED**  
**Jan 21, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

C/O JUNE VALLS  
26455 OLD 41 RD. UNIT 19  
BONITA SPRINGS, FL 34135

## **New Principal Place of Business:**

## **Current Mailing Address:**

C/O JUNE VALLS  
207 DOLPHIN COVE  
BONITA SPRINGS, FL 34134

## **New Mailing Address:**

FEI Number: 26-2632834

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VALLS, JUNE  
207 DOLPHIN COVE CT.  
BONITA SPRINGS, FL 34134 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

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PD  
Name: PAGANO, ROBERT  
Address: 26455 OLD 41  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: V  
Name: HARRIGAN, JEANETTE  
Address: 26455 OLD 41  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: STD  
Name: VALLS, JUNE  
Address: 26455 OLD 41  
City-St-Zip: BONITA SPRINGS, FL 34135

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: JEANETTE HARRIGAN

VP

01/21/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date