TILE-NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000049168

BON-AIRE OF LEE COUNTY, INC.

	ie of the occurry mo-								
Principal Place	e of Business	Mailin	g Address	-		1 (##1186) (##.1848) # Bill Bail Bail Bail ##) 	#11#1 #11 ##1	
15152 FIDDLES	TICK BLVD.	15152	FIDDLESTICK BLVD.						
FORT MYERS FL 33912 FORT MYERS FL 33912						DO NOT WRITE IN THIS SPACE			
							IS SPACE		
						3. Date Incorporated or Qualifed		ļ	
		2- 11	-iliae Adduses			06/23/1995 4. FEI Number	An	plied For	
_	flace of Business	⊢	ailing Address			65-0591697		t Applicable	
21		26	uite, Apt. #, etc.			05-0591097	\$8.75 A		
Suite, Apt.	#, etc.	27	ille, Apr. #, etc.			5. Certifcate of Status Desired	Fee Re		
City & State	io		ity & State		 	& Election Compaign Financing	\$5.00	May Bo	_
23		28	,			Trust Fund Contribution	Added t	, ,	
Zip	Country	Zi	p	Соип	try	8. This corporation owes the current year	ntangible		
24	25	29	` r	30	·	Personal Property Tax.	Yes	I⊇No	
	9. Name and Address of Curre					10. Name and Address of New Registere	d Agent		
					81 Name		•		
	Y, BONNNIE L				B2 Street Add	dress (P.O. Box Number is Not Acceptable)			
15152 FIDDLESTICKS BLVD.					ou cou no	ress (F.O. Box Humber is Not Acceptable)			
FT. I	MYERS FL 33912				83			1	
					84 City		. 85 Zip (Code	
				-		F	L		
office or r	registered agent, or both, in the State am familiar with, and accept the obliga-	of Florida.	Such change was at	ithorized rida Statu	by the corporaties.	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	ointment as re	gistered	
0.0.1.1.0.1								-	_
	Signature, typed or printed name of registered age					red when reinstating) DATE ADDITIONS/CHANGES TO DEFICERS.	AND DIRECTO	RS IN 12	(00)
12.	OFFICERS AI		ORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	14 (00)
12.	OFFICERS AI			13. 1.1 TITI	E	•			(44/00)
12. TITLE NAME	PSTD PSTD TROY, BONNIE L		ORS	13. 1.1 TITL 1.2 NAM	E AE	•			(44/08)
12. TITLE NAME STREET ADDRESS	OFFICERS AI PSTD TROY, BONNIE L 15152 FIDDLESTICK BLVD.		ORS	13. 1.1 TITU 1.2 NAM 13 STF	E ME EET ADDRESS	•			00000 (44,00)
12. TITLE NAME STREET ADDRESS CITY- ST- ZIP	PSTD PSTD TROY, BONNIE L		ORS DELETE	13. 1.1 TITU 1.2 NAM 13 STF 1.4 CIT	E ME EET ADDRESS (- ST- ZIP	•			CD0E024 (44/00)
12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE	OFFICERS AI PSTD TROY, BONNIE L 15152 FIDDLESTICK BLVD.		ORS	13. 1.1 TITL 1.2 NAM 13 STE 1.4 CIT 2.1 TITL	E AE BEET ADDRESS (-ST-ZIP	•	Change	☐ Addition	CD2E034 (41/08)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AI PSTD TROY, BONNIE L 15152 FIDDLESTICK BLVD.		ORS DELETE	13. 1.1 TITL 1.2 NAM 1.3 STF 1.4 CIT 2.1 TITL 2.2 NAM	E AE EET ADDRESS (-ST-ZIP E	•	Change	☐ Addition	CD2E034 (44 (08)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AI PSTD TROY, BONNIE L 15152 FIDDLESTICK BLVD.		ORS DELETE	13. 1.1 TITI 1.2 NAM 13 STF 1.4 CIT 2.1 TITI 2.2 NAM 2.3 STF	E AE BEET ADDRESS A-ST-ZIP E AE BEET ADDRESS	•	Change	☐ Addition	CD2E034 (41/08)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AI PSTD TROY, BONNIE L 15152 FIDDLESTICK BLVD.		ORS DELETE	13. 1.1 TITI 1.2 NAM 13 STF 1.4 CIT 2.1 TITI 2.2 NAM 2.3 STF	E AE AEET ADDRESS A-ST-ZIP E AE AEEET ADDRESS Y-ST-ZIP	•	Change	☐ Addition	CD0E034 (44/08)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AI PSTD TROY, BONNIE L 15152 FIDDLESTICK BLVD.		ORS DELETE DELETE	13. 1.1 TIT 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI	E AE EEET ADDRESS 7-ST-ZIP E AE EEET ADDRESS Y. ST. ZIP	•	☐ Change	☐ Addition	CD2E034 (41(08)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	OFFICERS AI PSTD TROY, BONNIE L 15152 FIDDLESTICK BLVD.		ORS DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI	E AE BEET ADDRESS AST-ZIP E AE BEET ADDRESS Y. ST. ZIP E AE AE AE AE AE AE AE AE	•	☐ Change	☐ Addition	VB0144 (44/08)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	OFFICERS AI PSTD TROY, BONNIE L 15152 FIDDLESTICK BLVD.		ORS DELETE DELETE	13. 1.1 TITI 1.2 NAJ 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAJ 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAJ 3.3 STF	E AE BEET ADDRESS /- ST-ZIP E AE BEET ADDRESS Y- ST-ZIP LE AE BEET ADDRESS AE BEET ADDRESS	•	☐ Change	☐ Addition	CD00004 (44 (00)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	OFFICERS AI PSTD TROY, BONNIE L 15152 FIDDLESTICK BLVD.		ORS DELETE DELETE	13. 1.1 TITI 1.2 NAJ 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAJ 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAJ 3.3 STF	E AE BEET ADDRESS AE AE BEET ADDRESS Y. ST. ZIP E AE BEET ADDRESS Y. ST. ZIP AE BEET ADDRESS Y. ST. ZIP	•	☐ Change	☐ Addition	(44)(06)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AI PSTD TROY, BONNIE L 15152 FIDDLESTICK BLVD.		ORS DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 3.4, CIT	E AE BEET ADDRESS AE AE BEET ADDRESS Y. ST. ZIP E AE BEET ADDRESS Y. ST. ZIP E AE BEET ADDRESS Y. ST. ZIP E BEET ADDRESS Y. ST. ZIP E	•	☐ Change	Addition Addition	(44,08)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME NAME NAME	PSTD TROY, BONNIE L 15152 FIDDLESTICK BLVD. FORT MYERS FL 33912		ORS DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 3.4 CIT 4.1 TITI 4.2 NAI	E AE BEET ADDRESS AE AE BEET ADDRESS Y. ST. ZIP E AE BEET ADDRESS Y. ST. ZIP E AE BEET ADDRESS Y. ST. ZIP E BEET ADDRESS Y. ST. ZIP E	•	☐ Change	Addition Addition	(44/08)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PSTD TROY, BONNIE L 15152 FIDDLESTICK BLVD. FORT MYERS FL 33912		ORS DELETE DELETE	13. 1.1 TITI 1.2 NAN 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAN 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAN 3.3 STF 3.4, CIT 4.1 TITI 4.2 NAN 4.3 STF	E AE BEET ADDRESS AE BEET ADDRESS Y. ST. ZIP E AE BEET ADDRESS Y. ST. ZIP E AE BEET ADDRESS Y. ST. ZIP E BEET ADDRESS Y. ST. ZIP E BEET ADDRESS E BEET ADDRE	•	☐ Change	Addition Addition	(44,08)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME NAME NAME	PSTD TROY, BONNIE L 15152 FIDDLESTICK BLVD. FORT MYERS FL 33912		ORS DELETE DELETE	13. 1.1 TITI 1.2 NAN 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAN 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAN 3.3 STF 3.4, CIT 4.1 TITI 4.2 NAN 4.3 STF	E AE BEET ADDRESS AST-ZIP AE BEET ADDRESS Y- ST-ZIP AE BEET ADDRESS Y- ST-ZIP AE BEET ADDRESS Y- ST-ZIP E ME BEET ADDRESS Y- ST-ZIP E ME BEET ADDRESS Y- ST-ZIP	•	☐ Change	Addition Addition	(44/00)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD TROY, BONNIE L 15152 FIDDLESTICK BLVD. FORT MYERS FL 33912		ORS DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 3.4 CIT 4.2 NAI 4.3 STF 4.4 CIT 4.4 CIT 4.4 CIT 4.4 CIT 4.4 CIT	E AE BEET ADDRESS (-ST-ZIP AE BEET ADDRESS Y-ST-ZIP BEET ADDRESS Y-ST-ZIP E	•	☐ Change ☐ Change ☐ Change	Addition Addition Addition	(41,08)

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

☐ DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

Daytime Phone #

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90077 015 ***150.00

Addition

Change