

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

FILED

Jun 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000080865 (5)

1. Corporation Name

BONNIE'S PLACE, INC.

Principal Place of Business

CHASEWOOD PLAZA, SUITE 30
6390 INDIANTOWN RD.
JUPITER FL 33458

Mailing Address

CHASEWOOD PLAZA, SUITE 30
6390 INDIANTOWN RD.
JUPITER FL 33458

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/20/1995

4. FEI Number

65-0616309

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

GUMSON, RICHARD P
CHASEWOOD PLAZA, SUITE 30
6390 INDIANTOWN RD.
JUPITER FL 33458

10. Name and Address of New Registered Agent

81 Name

Cripps, Steven

82 Street Address (P.O. Box Number is Not Acceptable)

1802 Australian Ave S.

83

84 City

WPR

FL

85 Zip Code

33409

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and this is applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Steven Cripps

6/12/98

12. OFFICERS AND DIRECTORS

TITLE

D

PROPP, BONNIE L

6738 VIEWPOINT CIRCLE

JUPITER FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

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.

SIGNATURE

Bonnie L. Propp

561-743-8330

4/7/98

561-743-8330

CR2E034 (10/97)