

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 14, 2007 08:00 AM
Secretary of State

DOCUMENT # P96000029591

1. Entity Name
BON APART REAL ESTATE INC.



Principal Place of Business
**521 LOQUAT DRIVE
P.O. BOX 898
ANNA MARIA, FL 34216**

Mailing Address
**C/O DAVID S BLAND, CPA
2100 CONSTITUTION BLVD 118
SARASOTA, FL 34231 US**



01162007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0668761

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**REICHMANN, BERTIL
521 LOQUAT DRIVE
P.O. BOX 898
ANNA MARIA, FL 34216**

**DO NOT WRITE
IN THIS SPACE**

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

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

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
REICHMANN, BERTIL
P.O. BOX 898
ANNA MARIA, FL 34216**

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that it changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/04
Date

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IN THIS SPACE**

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