

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000053924

Entity Name: BONNIE FLECKNER, INC.

FILED  
Apr 25, 2007  
Secretary of State

## Current Principal Place of Business:

8632 GRIFFIN RD  
COOPER CITY, FL 33328

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 293000  
DAVIE, FL 33329

## New Mailing Address:

FEI Number: 65-0849400

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FLECKNER, BONNIE S PRES.  
8632 GRIFFIN RD  
COOPER CITY, FL 33328 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: P ( ) Delete  
Name: FLECKNER, BONNIE S  
Address: 9220 OAK GROVE CIRCLE  
City-St-Zip: DAVIE, FL 33328 US

Title: VP ( ) Delete  
Name: WOLF, JULIE F  
Address: 10445 CANTERBURY COURT  
City-St-Zip: DAVIE, FL 33328 US

Title: T (X) Delete  
Name: WOLF, WILLIAM H III  
Address: 10445 CANTERBURY COURT  
City-St-Zip: DAVIE, FL 33328

Title: S (X) Delete  
Name: FLECKNER, DONALD  
Address: 9220 OAK GROVE CIR  
City-St-Zip: DAVIE, FL 33328

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BONNIE S FLECKNER

PRES

04/25/2007

Electronic Signature of Signing Officer or Director

Date