

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 26, 2000 8:00 am
Secretary of State

05-26-2000 90133 017 ***150.00

DOCUMENT # Pa90000004625 ✓

1. Entity Name

BONUM ASSOCIATES, INC.

Principal Place of Business Mailing Address
 15755 IONA LAKES DRIVE P.O. BOX 6478
 FT. MYERS, FL 33908 FT. MYERS BEACH, FL 33932

2. Principal Place of Business

3. Mailing Address
 15755 IONA LAKES DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
 FT. MYERS, FL

4. FEI Number
 65-0887357

Applied For
 Not Applicable

Zip Country

Zip Country
 33908 LEE

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DANA B. MATHENY
 15755 IONA LAKES DRIVE
 FT. MYERS, FL 33908

Name

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

City

FL

Zip Code

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.

SIGNATURE Dana B. Matheny

4/24/2000

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE NAME PRESIDENT/DIRECTOR ☐ Delete
 STREET ADDRESS DANA B. MATHENY
 CITY - ST - ZIP 1755 IONA LAKES DRIVE
 FT. MYERS, FL 33908

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY - ST - ZIP

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY - ST - ZIP

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 STREET ADDRESS
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 STREET ADDRESS
 CITY - ST - ZIP

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY - ST - ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY - ST - ZIP

TITLE NAME SECRETARY/TREASURER ☐ Change ☒ Addition
 STREET ADDRESS EDWARD E. MATHENY
 CITY - ST - ZIP 15755 IONA LAKES DRIVE
 FT MYERS, FL 33908

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY - ST - ZIP

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
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TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY - ST - ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dana B. Matheny

4/24/2000 941-432-1786

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #