

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V12646

FILED  
Apr 16, 2007  
Secretary of State

Entity Name: SCOTT D. BONK AND ASSOCIATES, INC.

## Current Principal Place of Business:

11691 GATEWAY BLVD  
105  
FORT MYERS, FL 33913 US

## New Principal Place of Business:

## Current Mailing Address:

11691 GATEWAY BLVD  
105  
FORT MYERS, FL 33913 US

## New Mailing Address:

FEI Number: 65-0322607      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BONK, SCOTT D  
12770 ALLENDALE CIRCLE  
FT MYERS, FL 33912 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: PT ( ) Delete  
Name: BONK, SCOTT D.  
Address: 12770 ALLENDALE CIRCLE  
City-St-Zip: FORT MYERS, FL 33912

Title: S ( ) Delete  
Name: BONK, SHIRLEY M  
Address: 12770 ALLENDALE CIRCLE  
City-St-Zip: FT. MYERS, FL 33912

Title: V ( ) Delete  
Name: BONK, JEFFREY S  
Address: 19491 POPPYTREES COURT  
City-St-Zip: LEHIGH ACRES, FL 33936

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V (X) Change ( ) Addition  
Name: BONK, JEFFREY S  
Address: 11030 RIVER TRENT COURT  
City-St-Zip: LEHIGH ACRES, FL 33971

I hereby certify that the information supplied with this filing does not qualify for the 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: SCOTT D. BONK

P

04/16/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date