

**2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 730217

**Entity Name:** COUNTRY CLUB APARTMENTS AT BONAVENTURE 32  
CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

16300 COUNTRY CLUB RD.  
SUITE 2A C/O MANAGEMENT OFFICE  
WESTON, FL 33326

**Current Mailing Address:**

C/O ASSOCIATION SERVICES OF FLORIDA  
10112 USA TODAY WAY  
MIRAMAR, FL 33025 US

**FEI Number:** 59-1593521

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RODRIGUEZ, MARC  
C/O ASSOCIATION SERVICES OF FLORIDA  
10112 USA TODAY WAY  
MIRAMAR, FL 33025 US

*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:** RODRIGUEZ MARC

02/21/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name DEUTSCH, PEARL S.  
Address C/O ASSOCIATION SERVICES OF  
FLORIDA  
10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

Title SECRETARY  
Name RODRIGUEZ, HAYDEE C.  
Address C/O ASSOCIATION SERVICES OF  
FLORIDA  
10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

Title DIRECTOR  
Name ZALKIN, DOROTHY  
Address C/O ASSOCIATION SERVICES OF  
FLORIDA  
10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

Title DIRECTOR  
Name GILBERT, BETTY  
Address C/O ASSOCIATION SERVICES OF  
FLORIDA  
10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

Title VP  
Name ROOSTA, BAHRAM  
Address C/O ASSOCIATION SERVICES OF  
FLORIDA  
10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

Title PRESIDENT  
Name ROMERO, MARIA  
Address C/O ASSOCIATION SERVICES OF  
FLORIDA  
10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

Title TREASURER  
Name KNOLL, JACK  
Address C/O ASSOCIATION SERVICES OF  
FLORIDA  
10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

Title DIRECTOR  
Name MOHAMMAD, JOANNE  
Address C/O ASSOCIATION SERVICES OF  
FLORIDA  
10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

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I hereby 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  
SIGNATURE ROMERO MARIA PRESIDENT 02/21/2019  
of the signatory, Officer, Director, Receiver or the receiver or trustee empowered to execute this report as required by Section 67, Florida Statutes; and that my name appears  
above, or on an attachment with all other like empowered.

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Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name MICHAEL, HARRY  
Address C/O ASSOCIATION SERVICES OF FLORIDA  
10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025