

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000010594

**Entity Name:** BONITA WONDER GARDENS, INC.**Current Principal Place of Business:**27180 OLD 41 ROAD  
BONITA SPRINGS, FL 34135**Current Mailing Address:**P.O. BOX 822  
BONITA SPRINGS, FL 34133**FEI Number:** 46-4168846**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FLAMMANG, DONNA M ESQ.  
10940 HARMONY PARK DRIVE  
BONITA SPRINGS, FL 34135 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:** DONNA M. FLAMMANG, ESQUIRE

01/24/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LEONARD, PATRICIA  
Address        23036 LONE OAK DRIVE  
City-State-Zip: ESTERO FL 33928

Title            TREASURER  
Name            WEIDENMILLER, WESTLEY  
Address        10940 HARMONY PARK DRIVE  
City-State-Zip: BONITA SPRINGS FL 34135

Title            VP  
Name            GILKEY, DENNIS  
Address        9220 BONITA BEACH ROAD  
                 SUITE 206  
City-State-Zip: BONITA SPRINGS FL 34135

Title            DIRECTOR  
Name            LILES, JANE  
Address        27233 J C LANE  
City-State-Zip: BONITA SPRINGS FL 34135

Title            DIRECTOR  
Name            MCCURDY, JACKIE  
Address        3070 GREENFLOWER COURT  
City-State-Zip: BONITA SPRINGS FL 34134

Title            DIRECTOR  
Name            RUBACKY, MARJORIE  
Address        8951 BONITA BEACH ROAD  
                 SUITE 525-211  
City-State-Zip: BONITA SPRINGS FL 34135

Title            DIRECTOR  
Name            BRAENDLE, DEBI  
Address        23159 AMGAWAY #109  
City-State-Zip: ESTERO FL 33928

Title            DIRECTOR, SECRETARY  
Name            FLAMMANG, DONNA  
Address        27200 RIVERVIEW CENTER  
                 SUITE 310  
City-State-Zip: BONITA SPRINGS FL 34134

**Continues on page 2**

*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 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PATRICIA LEONARD

PRESIDENT

01/24/2017

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name GIBSON, MIKE  
Address 27024 ADRIANA CIRCLE #201  
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR  
Name LICHTENSTEIN, IKE  
Address 9990 COCONUT ROAD  
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR  
Name MCINTOSH, CONNIE  
Address 24461 WOODSAGE DRIVE  
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR  
Name MODARELLI, VINCENT  
Address 21530 BERWHICH RUN  
City-State-Zip: ESTERO FL 33928

Title DIRECTOR  
Name GUTSHALL, LINDA  
Address 1025 COLLINS CENTER WAY  
City-State-Zip: NAPLES FL 34110

Title DIRECTOR  
Name WRIGHT, ANNE  
Address 9101 BONITA BEACH ROAD  
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR  
Name MATHES, JOHN  
Address 27890 OLD 41 ROAD  
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR  
Name SMITH, SABRA  
Address 27290 RIVER ROYALE CT.  
City-State-Zip: BONITA SPRINGS FL 34135