2014 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N96000005287

Entity Name: THE VILLAGES OF BONITA HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O SAK & ASSOCIATES MGMT, INC
8695 COLLEGE PKWY, STE 2031
FT MYERS, FL 33919

Current Mailing Address:

C/O SAK & ASSOCIATES MGMT, INC
8695 COLLEGE PKWY, STE 2031
FT MYERS, FL 33919 US

FEI Number: 59-3421034

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KOLENUT, STEPHANIE A
C/O SAK & ASSOCIATES MGMT, INC
8695 COLLEGE PKWY, STE 2031
FT MYERS, FL 33919 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: STEPHANIE A KOLENUT   08/01/2014

              Electronic Signature of Registered Agent   Date

Officer/Director Detail :

Title	DIRECTOR		Title	TD
Name	WEAVER, RICHARD		Name	ABELS, ROBERT
Address	C/O SAK & ASSOCIATES MGMT, INC 8695 COLLEGE PKWY, STE 2031		Address	C/O SAK & ASSOCIATES MGMT, INC 8695 COLLEGE PKWY, STE 2031
City-State-Zip:	FT MYERS FL 33919		City-State-Zip:	FT MYERS FL 33919
Title	SD		Title	VD
Name	BASLER, JUDY		Name	BAGLEY, HOLLIE
Address	C/O SAK & ASSOCIATES MGMT, INC 8695 COLLEGE PKWY, STE 2031		Address	C/O SAK & ASSOCIATES MGMT, INC 8695 COLLEGE PKWY, STE 2031
City-State-Zip:	FT MYERS FL 33919		City-State-Zip:	FT MYERS FL 33919
Title	PD			
Name	ADAMS, FLOYD			
Address	C/O SAK & ASSOCIATES MGMT, INC 8695 COLLEGE PKWY, STE 2031			
City-State-Zip:	FT MYERS FL 33919			

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: FLOYD ADAMS   P   08/01/2014