

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2000 8:00 am
Secretary of State


02-04-2000 90083 028 ****61.25

DOCUMENT # 743044
 1. Entity Name
THE BOULEVARD ASSOCIATION, INC.

Principal Place of Business 7701 STARKEY RD.N. SEMINOLE FL 34647	Mailing Address 7701 STARKEY RD SEMINOLE FL 33777-4349 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

0 1 0 1 4 0



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2036500	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LIBERTE MANAGEMENT GROUP OPI INC
10645 1ST EAST
TREASURE ISLAND FL 33706

7. Name and Address of New Registered Agent

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 *[Signature]* **N/A**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS

T NAME TUORTO, CAROL STREET ADDRESS 7701 STARKEY RD #702 CITY-ST-ZIP SEMINOLE FL	<input type="checkbox"/> Delete
DS NAME RAIMANN, CAROL STREET ADDRESS 7701 STARKEY RD, #510 CITY-ST-ZIP SEMINOLE FL	<input type="checkbox"/> Delete
D NAME GALGANO, DAN STREET ADDRESS 7701 STARKEY RD SUITE 427 CITY-ST-ZIP SEMINOLE FL	<input type="checkbox"/> Delete
D NAME KIBLER, KEN STREET ADDRESS 7701 STARKEY RD #111 CITY-ST-ZIP SEMINOLE FL	<input type="checkbox"/> Delete
P NAME FERGUSON, HUGH STREET ADDRESS 7701 STARKEY RD, #519 CITY-ST-ZIP SEMINOLE FL	<input type="checkbox"/> Delete
DV NAME DEVEAU, BEVERLY STREET ADDRESS 7701 STARKEY RD SUITE 504 CITY-ST-ZIP SEMINOLE FL	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **Hugh A. Ferguson** **01-20-2000** **727-488-5066**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #