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FILED  
Apr 27 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 754403 (4)  
1. Corporation Name  
BOULEVARD HOUSE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address  
2830 NW 41 ST  
F  
GAINESVILLE FL 32606  
US  
P.O. BOX 147050-30  
GAINESVILLE FL 32614-7050  
US

3. Date Incorporated or Qualified

09/30/1980

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

2. Principal Place of Business 2a. Mailing Address

21 41st Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 Suite F 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH, BEVERLY K.  
2830 NW 41ST ST  
SUITE F  
GAINESVILLE FL 32606

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable)

Street

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD  
NAME PIERSON, ANN  
STREET ADDRESS 3315 NW 47TH TERRACE  
CITY-ST-ZIP GAINESVILLE FL

TITLE STD  
NAME MADSEN, KIRSTEN M  
STREET ADDRESS 2435 N.W. 27TH PL.  
CITY-ST-ZIP GAINESVILLE FL

TITLE VD  
NAME EISENWEIN  
STREET ADDRESS 351 NE BLVD  
CITY-ST-ZIP GAINESVILLE FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP 32601

2.1 TITLE VD  
2.2 NAME  
2.3 STREET ADDRESS Place  
2.4 CITY-ST-ZIP 32605

3.1 TITLE D  
3.2 NAME Esenwein, George  
3.3 STREET ADDRESS 351 NE Boulevard B-2  
3.4 CITY-ST-ZIP 32603

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*[Signature]*

20 April 1998

352-374-8000

CP2E037 (10/97)