2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#771032

FILED Apr 27, 2012 Secretary of State

Entity Name: BIENVILLE SQUARE TOWNHOUSE OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

115 HUGHES ST NE

FORT WALTON BEACH, FL 32548 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1844

FT WALTON BCH, FL 32549 US

FEI Number: 59-2591906 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PRESTARRI, TERIA 422 BALLY WAY

NICEVILLE, FL 32578 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: PRESTARRI, TERIA
Address: 422 BALLY WAY
City-St-Zip: NICEVILLE, FL 32578

Title: VPD

Name: HUGHES, ROGER Address: 101 POQUITO RD City-St-Zip: SHALIMAR, FL 32579

Title: TD

Name: ROBERTS, TERRI Address: 580 MOONEY RD, NE

City-St-Zip: FORT WALTON BEACH, FL 32547

Title: SD

Name: DORMAN, BARBARA Address: 306 SIKES CIRCLE

City-St-Zip: FORT WALTON BEACH, FL 32548

Title: [

Name: JONES, CAROLE Address: 108 NEBRASKA AVE

City-St-Zip: FORT WALTON BEACH, FL 32548

Title: MGR Name: COX, SUSAN

Address: 348 HOLMES BLVD, NW

City-St-Zip: FORT WALTON BEACH, FL 32548

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: SUSAN COX MGR 04/27/2012