

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 12, 2004  
Secretary of State**

DOCUMENT# N45763

Entity Name: THE BOULEVARD 1050 CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1050 WEST GRANADA BLVD  
SUITE # 1  
ORMOND BEACH, FL 32174 US

**New Principal Place of Business:**

**Current Mailing Address:**

1050 W GRANADA BLVD  
SUITE 1  
ORMOND BEACH, FL 32174 US

**New Mailing Address:**

FEI Number: 59-3094456      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SAOJI, MOHAN DR  
1050 W GRANADA BLVD.  
SUITE # 1  
ORMOND BEACH, FL 32174 US

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

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      ( ) Delete  
Name: MIRANTE, JOSEPH P DR.  
Address: 1050 W. GRANADA BLVD SUITE 4  
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: DV      ( ) Delete  
Name: MUNIER, MICHAEL A DR.  
Address: 1050 W. GRANADA BLVD. SUITE # 4  
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: STD      ( ) Delete  
Name: SAOJI, MOHAN K DR.  
Address: 1050 W GRANADA BLVD SUITE 1.  
City-St-Zip: ORMOND BCH, FL 32174 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MOHAN SAOJI

STD

04/12/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date