| DOCUMENT# N0200003658                     |  |
|---|--|
| Entity Name: BSV OWNERS ASSOCIATION, INC. |  |

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# Current Principal Place of Business:

606 GRANT CT SATELLITE BEACH, FL 32937

### **Current Mailing Address:**

606 GRANT CT SATELLITE BEACH, FL 32937

### FEI Number: 03-0457830

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

ELLIS, RICHARD 606 GRANT CT SATELLITE BEACH, FL 32937 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

## Officer/Director Detail :

|  | Title           | DP                       | Title           | DST                      |  |
|--|-----------------|--------------------------|-----------------|--------------------------|--|
|  | Name            | ELLIS, RICHARD           | Name            | CAUDLE, JILL L           |  |
|  | Address         | 606 GRANT COURT          | Address         | 604 GRANT CT             |  |
|  | City-State-Zip: | SATELLITE BEACH FL 32937 | City-State-Zip: | SATELLITE BEACH FL 32937 |  |
|  |                 |                          |                 |                          |  |
|  | Title           | DV                       |                 |                          |  |
|  | Name            | CAUDLE, JEANNE B         |                 |                          |  |
|  | Address         | PO BOX 410187            |                 |                          |  |
|  | City-State-Zip: | MELBOURNE FL 32941       |                 |                          |  |
|  |                 |                          |                 |                          |  |

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: JILL CAUDLE

DST

Electronic Signature of Signing Officer/Director Detail

FILED Mar 09, 2014 Secretary of State CC3824729090

Certificate of Status Desired: No

Date