230 N. BEACH DAYTONA BEA	ST.,SUITE 4 ACH, FL 32114			
Current Mai	ling Address:			
	CH ST.,SUITE 4 BEACH, FL 32114 US			
FEI Number: 59-2983895			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent:			
DOUSTAN, LLO 230 N. BEACH DAYTONA BEA				
The above name	d entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of Flo	rida.
		-		
SIGNATURE	E ARAM KHAZRAEE	-		01/30/2023
SIGNATURE	Electronic Signature of Registered Agent			01/30/2023 Date
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent			
	Electronic Signature of Registered Agent	Title	DIRECTOR	
Officer/Dire	Electronic Signature of Registered Agent	Title Name	DIRECTOR LARRAIN, RIC J M.D	
<b>Officer/Dire</b> Title	Electronic Signature of Registered Agent ctor Detail : SECRETARY, TREASURER			
<b>Officer/Dire</b> Title Name	Electronic Signature of Registered Agent ctor Detail : SECRETARY, TREASURER POSEY, ADOLPH 420 S. NOVA ROAD	Name Address	LARRAIN, RIC J M.D	
<b>Officer/Dire</b> Title Name Address	Electronic Signature of Registered Agent ctor Detail : SECRETARY, TREASURER POSEY, ADOLPH 420 S. NOVA ROAD	Name Address	LARRAIN, RIC J M.D 411 S. CENTRAL AVE STE B	
Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent ctor Detail : SECRETARY, TREASURER POSEY, ADOLPH 420 S. NOVA ROAD DAYTONA BEACH FL 32114	Name Address	LARRAIN, RIC J M.D 411 S. CENTRAL AVE STE B	
Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent ctor Detail : SECRETARY, TREASURER POSEY, ADOLPH 420 S. NOVA ROAD DAYTONA BEACH FL 32114 PRESIDENT	Name Address	LARRAIN, RIC J M.D 411 S. CENTRAL AVE STE B	

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: ARAM KHAZRAEE

Electronic Signature of Signing Officer/Director Detail

Date

# 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N35061

#### Entity Name: THE BOULEVARD WEST CONDOMINIUM ASSOCIATION, INC.

## **Current Principal Place of Business:**

230 N. BEACH ST., SUITE 4

FILED Jan 30, 2023 **Secretary of State** 0861675938CC

PRESIDENT

01/30/2023