

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40878

Entity Name: BOUCHELLE ISLAND VI CONDOMINIUM ASSOCIATION, INC.

FILED
Feb 15, 2021
Secretary of State
5210919082CC

Current Principal Place of Business:

C/O INTRACOASTAL BOOKKEEPING & MANAGEMENT
1100 OCEAN SHORE BLVD., SUITE 7
ORMOND BEACH, FL 32176

Current Mailing Address:

C/O INTRACOASTAL BOOKKEEPING & MANAGEMENT
P.O. BOX 1527
ORMOND BEACH, FL 32175 US

FEI Number: 59-3038569

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KREINEST, DEBORAH
C/O INTRACOASTAL BOOKKEEPING & MANAGEMENT
1100 OCEAN SHORE BLVD., SUITE 7
ORMOND BEACH, FL 32176 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: DEBORAH KREINEST

02/15/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name STUMP, RANDALL W.
Address P.O. BOX 804
City-State-Zip: NEW SMYRNA BEACH FL 32170

Title VP
Name HENCKEN, JEANNE
Address 442 BOUCHELLE DRIVE #302
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title DIRECTOR
Name LANDGREBE, GENE
Address 442 BOUCHELLE DR UNIT 101
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title DIRECTOR
Name LARSON, LINDA
Address 442 BOUCHELLE DR
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title SECRETARY/TREASURER
Name HOPKINS, JODIE
Address 442 BOUCHELLE DR
UNIT 304
City-State-Zip: NEW SMYRNA BEACH FL 32169

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: RANDALL STUMP

PRESIDENT

02/15/2021

Electronic Signature of Signing Officer/Director Detail

Date