## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005236

Entity Name: BOUCHELLE ISLAND XIV CONDOMINIUM ASSOCIATION, INC.

FILED Feb 13, 2018 Secretary of State CC4408299595

# **Current Principal Place of Business:**

449 BOUCHELLE DRIVE

NEW SMYRNA BEACH. FL 32169

## **Current Mailing Address:**

C/O ATLANTIC COMM ASSOC MGMT & ACCTNG INC 507-C HERBERT STREET PORT ORANGE, FL 32129

FEI Number: 59-3210933 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

YACEK, RENNY M 507-C HERBERT ST.

PORT ORANGE, FL 32129 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: RENNY M YACEK 02/13/2018

Electronic Signature of Registered Agent Date

Name

NOONAN, DAWN

#### Officer/Director Detail:

TitlePRESIDENT, DIRECTORTitleVP, DIRECTORNameRHODES, SCOTTNamePEAKE, PEGGY

Address 449 BOUCHELLE DR. #203 Address 426 BOUCHELLE DR #404

City-State-Zip: NEW SMYRNA BEACH FL 32169 City-State-Zip: NEW SMYRNA BEACH FL 32169

Title TREASURER, DIRECTOR Title SECRETARY, DIRECTOR

Name PIKE, SUSAN

Address 11123 PEPPERMILL LANE Address 245 N. HICKORY STREET

City-State-Zip: FISHERS IN 46038 City-State-Zip: MASSAPEQUA NY 11758-2925

Title DIRECTOR

Name JOHNSON, CLAUDETTE
Address 90 WILL SCARLETT ROAD
City-State-Zip: MCMURRAY PA 15317

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: SCOTT RHODES PRESIDENT 02/13/2018