

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771032

FILED
Feb 26, 2011
Secretary of State

Entity Name: BIENVILLE SQUARE TOWNHOUSE OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

115 HUGHES ST NE
FORT WALTON BEACH, FL 32548 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1844
FT WALTON BCH, FL 32549 US

New Mailing Address:

FEI Number: 59-2591906

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRESTARRI, TERIA
422 BALLY WAY
NICEVILLE, FL 32578 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: VPD
Name: HUNT, GARY
Address: 115 HUGHES ST NE C3
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: TD
Name: ROBERTS, TERRI
Address: 115 HUGHES ST NE F3
City-St-Zip: FORT WALTON BEACH, FL 32578

Title: P
Name: PRESTARRI, TERIA R
Address: 422 BALLY WAY
City-St-Zip: NICEVILLE, FL 32578

Title: SD
Name: DORMAN, BARBARA
Address: 115 HUGHES ST NE E1
City-St-Zip: NICEVILLE, FL 32578

Title: D
Name: POTTS, JUDY
Address: 115 HUGHES ST A-5
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D
Name: HUGHES, ROGER
Address: 115 HUGHES ST NE
City-St-Zip: FORT WALTON BEACH, FL 32548

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: TERIA R PRESTARRI

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02/26/2011

Electronic Signature of Signing Officer or Director

Date