

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N03000009187

1. Entity Name
BOULEVARD GARDENS PROGRESSIVE HOMEOWNERS' ASSOCIATION INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 JUL 12 PM 3:16

Principal Place of Business
154 NW 29 AVE
FORT LAUDERDALE, FL 33311

Mailing Address
154 NW 29 AVE
FORT LAUDERDALE, FL 33311

2. Principal Place of Business
154 NW 29 AVE
Suite, Apt. #, etc.

3. Mailing Address
154 NW 29 AVE
Suite, Apt. #, etc.



04/14/04 01029 016 87.50
07012004 Chg-NP CR2E037 (10/03)

City & State
FT LAUDERDALE

City & State
FT LAUDERDALE

4. FEI Number ☒ Applied For
Not Applicable

Zip Country
33311 BROWARD

Zip Country
33311 BROWARD

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BETHEL, WILLIAM
154 NW 29 AVE
FORT LAUDERDALE, FL 33311

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P
NAME MR. BETHEL, WILLIAM ☐ Delete
STREET ADDRESS 154 NW 29 AVE
CITY-ST-ZIP FORT LAUDERDALE, FL 33311

TITLE VP
NAME MS. COLEMAN, MATLENE ☐ Delete
STREET ADDRESS 81 NW 29 TERR
CITY-ST-ZIP FORT LAUDERDALE, FL 33311

TITLE S
NAME JACKSON, EDWARD ☒ Delete
STREET ADDRESS 445 NW 29 AVE
CITY-ST-ZIP FORT LAUDERDALE, FL 33311

TITLE T
NAME SMITH, LESLIE ☒ Delete
STREET ADDRESS 555 NW 29 AVE
CITY-ST-ZIP FORT LAUDERDALE, FL 33311

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S
NAME EVELIN BARTLEY ☐ Change ☐ Addition
STREET ADDRESS 215 NW 30 AVE
CITY-ST-ZIP FORT LAUDERDALE, FL 33311

TITLE T
NAME CHARLETT COLEMAN ☐ Change ☐ Addition
STREET ADDRESS 81 NW 29 TERR
CITY-ST-ZIP FORT LAUDERDALE, FL 33311

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William Bethel WILLIAM BETHEL JUL 7, 2004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

112
120