

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000009652

FILED
Oct 08, 2007
Secretary of State

Entity Name: BOULEVARD WEST CONDOMINIUM ASSOCIATION OF ROTONDA, INC.

Current Principal Place of Business:

190-C ROTONDA BLVD. WEST
ROTONDA WEST, FL 33947

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1832
ENGLEWOOD, FL 342951832

New Mailing Address:

FEI Number: 20-0817361 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BEAUGRAND, DIETER
13416 BUCKET CIRCLE
PORT CHARLOTTE, FL 33981 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: ROBERT C. DWELLY

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BEAUGRAND, DIETER
Address: 13416 BUCKETT CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: VD () Delete
Name: AGGRIPPINO, MICHAEL P
Address: 510 ROUTE 66
City-St-Zip: HUDSON, NY 12534

Title: TD () Delete
Name: DWELLY, ROBERT C
Address: 136 SOUTH STREET
City-St-Zip: BARRE, MA 01005

Title: SD () Delete
Name: AGGRIPPINO, BRENDA
Address: 510 ROUTE 66
City-St-Zip: HUDSON, NY 12534

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT C. DWELLY

TREA

10/08/2007

Electronic Signature of Signing Officer or Director

Date