

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003737

FILED  
Mar 15, 2012  
Secretary of State

**Entity Name:** BOULEVARD PROFESSIONAL CENTRE I CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

210 N. UNIVERSITY DR.  
SUITE 200  
CORAL SPRINGS, FL 33071

**New Principal Place of Business:**

**Current Mailing Address:**

FLORIDA TRUST REALTY  
210 NORTH UNIVERSITY DR SUITE 200  
CORAL SPRINGS, FL 33071

**New Mailing Address:**

**FEI Number:** 20-2737277

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

FLORIDA TRUST REALTY, INC.  
210 N. UNIVERSITY DR.  
SUITE 200  
CORAL SPRINGS, FL 33071 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: PD  
Name: ZAMBRANO, MARIO  
Address: 10794 PINES BLVD., 102  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: VPD  
Name: GRANDISON, NIGEL  
Address: 10794 PINES BLVD., 101  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: SD  
Name: BILODEAU, DEBRA  
Address: 10794 PINES BLVD., 104  
City-St-Zip: PEMBROKE PINES, FL 33026

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: ROBERT J. ARGENTI

MGR

03/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date