

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006977

FILED  
Apr 22, 2009  
Secretary of State

**Entity Name:** BUCEY'S PLACE 31ST STREET TOWNHOMES OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

902 A PALM BLVD S  
NICEVILLE, FL 32578

**New Principal Place of Business:**

**Current Mailing Address:**

902 A PALM BLVD S  
NICEVILLE, FL 32578

**New Mailing Address:**

**FEI Number:** 20-3294083

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOUSAND, BOBBIE W  
902 A PALM BLVD S  
NICEVILLE, FL 32578 US

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

PUTYNKOWSKI, DAWN S  
902 A PALM BLVD S  
NICEVILLE, FL 32578 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: DAWN S. PUTYNKOWSKI

04/22/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: WRIGHT, LAWRENCE A  
Address: 902 A PALM BLVD S  
City-St-Zip: NICEVILLE, FL 32578

Title: DVPS ( ) Delete  
Name: HOUSAND, BOBBIE  
Address: 905 A PALM BLVD S  
City-St-Zip: NICEVILLE, FL 32578

Title: T (X) Delete  
Name: HOUSAND, BOBBIE  
Address: 902 A PALM BLVD S  
City-St-Zip: NICEVILLE, FL 32578

Title: D (X) Delete  
Name: HOUSAND, TERRY W  
Address: 902 A PALM BLVD S  
City-St-Zip: NICEVILLE, FL 32578

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: MRS (X) Change ( ) Addition  
Name: HOUSAND, BOBBIE W  
Address: 902 A PALM BLVD S  
City-St-Zip: NICEVILLE, FL 32578

Title: MRS (X) Change ( ) Addition  
Name: DAWN, SVOBODA P  
Address: 902 A PALM BLVD S  
City-St-Zip: NICEVILLE, FL 32578

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: BOBBIE HOUSAND

OFFI

04/22/2009

Electronic Signature of Signing Officer or Director

Date