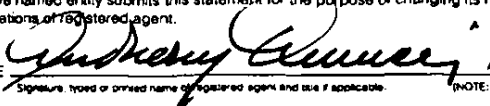
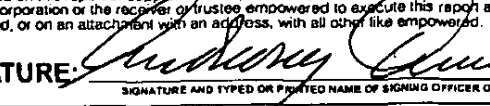


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

2/6.

FILED
Mar 19, 2007 8:00 am
Secretary of State

02-06-2007 90006 038 ****61.25

DOCUMENT # N06000005051			
1. Entity Name BOUCHELLE ISLAND XXXI CONDOMINIUM ASSOCIATION, INC.		Mailing Address 3424 S. ATLANTIC AVE. DAYTONA BCH SHORES, FL 32118	
Principal Place of Business 3424 S. ATLANTIC AVE. DAYTONA BCH SHORES, FL 32118		Mailing Address 3424 S. ATLANTIC AVE. DAYTONA BCH SHORES, FL 32118	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 285 West Dundee	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State Palatine IL	
Zip	Country	Zip	Country
		60074	
4. FEI Number 14-1962472		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent THURLOW, ROBERT S 415 CANAL ST. NEW SMYRNA BCH, FL 32168		7. Name and Address of New Registered Agent Name: Anthony Dimucci Street Address (P.O. Box Number is Not Acceptable) 3424 S. Atlantic Ave City: Daytona Daytona Bch FL Zip Code: 32118	
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 the registered agent. SIGNATURE:  Anthony Dimucci Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when terminating) DATE:			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DIMUCCI, ANTHONY 285 W. DUNDEE RD. PALATINE, IL 60067 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D VIHLEN, SID 200 N. PARK AVE., SUITE 200 SANFORD, FL 32771 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LECLAIRE, CORINNE 3424 S. ATLANTIC AVE. DAYTONA BCH SHORES, FL 32118 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  Anthony Dimucci		Date: 1-31-07 842-591-4400	