2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N06000011997

1. Entity Name BOARDWALK AT SUNTREE CONDOMINIUM NO. 1 OWNERS ASSOCIATION, INC.

Country

6. Name and Address of Current Registered Agent



Principal Place of Business

7331 OFFICE PARK PLACE SUITE 200 VIERA FL 32940

the obligations of registered agent.

Zip

Mailing Address 7331 OFFICE PARK PLACE

^{Zip} 32941

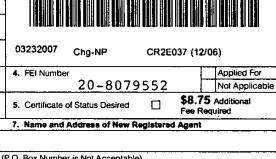
SUITE 200 VIERA, FL 32940

L Principal Place of Business - No P.O. Box #	3. Mailing Address			
	P.O. Box 410999			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			
City & State	City & State			
	Melbourne, FL			

FILED Apr 06, 2007 8:00 am Secretary of State

04-06-2007 90058 001 ***245.00

ppyyora



Name RENFRO, RICHARD E 7331 OFFICE PARK PLACE Street Address (P.O. Box Number is Not Acceptable) SUITE 200 VIERA, FL 32940 City 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

Country

SIGNATURE .	Signature, lypsed or printed name of registered agent and site if applied	ANT B			DATE	
	Filing Fee is \$61.25 Due by May 1, 2007		(NOTE: Registered Agent agreature req Election Campaign Financing Trust Fund Contribution.		Make check payable to Florida Department of State	
10.	OFFICERS AND DIRECTORS	11,		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RENFRO, ROBERT M 7331 OFFICE PARK PLACE, SUITE 200 VIERA, FL 32940	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
NTILE NAME STREET ADDRESS CITY-ST-ZP	VD EULER, ERNEST C 7331 OFFICE PARK PLACE, SUITE 200 VIERA, FL 32940	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	STD RENFRO, RICHARD E 7331 OFFICE PARK PLACE, SUITE 200 VIERA, FL 32940	☐ Defete	RITLE NAME STREET ADORESS CITY-ST-ZIP		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NILE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	nortify that the information was list with this filter	☐ Oelete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition

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. 0.4/0.4/0.73324