

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N40709

FILED
Jan 22, 2003
Secretary of State

Entity Name: BOUCHELLE ISLAND IV CONDOMINIUM ASSOCIATION, INC

Current Principal Place of Business:

44 BOUCHELLE DRIVE
NEW SMYRNA BEACH, FL 32169 US

New Principal Place of Business:

444 BOUCHELLE DRIVE
NEW SMYRNA BEACH, FL 32169 US

Current Mailing Address:

C/O ALL FL REALTY SERVICES
152 RIDGEWOOD AVE
DAYTONA BEACH, FL 32117 US

New Mailing Address:

FEI Number: 59-3037341 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALL FLORIDA REALTY SERVICES
152 RIDGEWOOD AVENUE
HOLLY HILL, FL 32117 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 () Delete
Name: MENDON, GARY
Address: 444 BOUCHELLE DR #102
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: TD () Delete
Name: SVEDLUND, CAROLYN
Address: 444 BOUCHELLE DR, #302
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VSD () Delete
Name: COOPER, WANDA
Address: 444 BOUCHELLE DR #205
City-St-Zip: NEW SMYRNA BCH, FL 32169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HUTCHINSON, JEROME
Address: 444 BOUCHELLE DRIVE #304
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VPD (X) Change () Addition
Name: COOPER, WANDA
Address: 444 BOUCHELLE DRIVE #205
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: STD (X) Change () Addition
Name: KING, WILLIAM ROBERT
Address: 444 BOUCHELLE DRIVE
City-St-Zip: NEW SMYRNA BCH, FL 32169

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JEROME HUTCHINSON

PD

01/22/2003

Electronic Signature of Signing Officer or Director

_____ Date