2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2012
Secretary of State

DOCUMENT# N40877

Entity Name: BOUCHELLE ISLAND V CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

445 BOUCHELLE DR
NEW SMYRNA BEACH, FL 32169 US

New Principal Place of Business:

445 BOUCHELLE DR
APE105
NEW SMYRNA BEACH, FL 32169 US

Current Mailing Address:

BOUCHELLE ISLAND V CONDOMINIUM
P.O. BOX 1687
NEW SMYRNA BEACH, FL 32170 US

New Mailing Address:

FEI Number: 59-3038568 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOLON, SUSAN CAM
103 ASIRE CT
NEW SMYRNA BEACH, FL 32169 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: D
Name: TODD, BART
Address: 445 BOUCHELLE DR #101
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: P
Name: KRUCK, DONALD
Address: 445 BOUCHELLE DR #205
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VP
Name: HAUGAN, SUE
Address: 445 BOUCHELLE DR
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: S/T
Name: BALLARD, MARGARET
Address: 445 BOUCHELLE DR
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D
Name: LINA, HEIJNS
Address: 445 BOUCHELLE DR
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: SUSAN SOLON CAM 02/10/2012

Electronic Signature of Signing Officer or Director Date