

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47890

FILED  
Mar 17, 2011  
Secretary of State

**Entity Name:** BOUCHELLE ISLAND IX CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O QUALITY CONDO MANAGEMENT  
4536 S CLYDE MORRIS BLVD, UNIT 2  
PORT ORANGE, FL 32129 US

**New Principal Place of Business:**

C/O QUALITY CONDO MANAGEMENT  
1100 OCEAN SHORE BLVD., SUITE 12  
ORMOND BEACH, FL 32175 US

**Current Mailing Address:**

C/O QUALITY CONDO MANAGEMENT  
4536 S CLYDE MORRIS BLVD, UNIT 2  
PORT ORANGE, FL 32129 US

**New Mailing Address:**

C/O QUALITY CONDO MANAGEMENT  
P.O. BOX 1527  
ORMOND BEACH, FL 32175 US

**FEI Number:** 59-3114830

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

QUALITY CONDOMINIUM MGMT  
4536 S CLYDE MORRIS BLVD UNIT 2  
PORT ORANGE, FL 32129 US

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

ERTL & KISTEMAKER BUSINESS LAW GROUP  
1651 N. CLYDE MORRIS BLVD.  
SUITE 2  
DAYTONA BEACH, FL 32117 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: CHRISTENE M. ERTL

03/17/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PACKER, KATHLEEN  
Address: 440 BOUCHELLE DR #105  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: S  
Name: FINTA, BOB  
Address: 440 BOUCHELLE DR #303  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: T  
Name: CHAPMAN, ROBERT J  
Address: 440 BOUCHELLE DR., 104  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VP  
Name: ROMANO, ANTHONY  
Address: 2605 QUAKER CHURCH ROAD  
City-St-Zip: YORK TOWN HEIGHTS, NY 10598

Title: D  
Name: ABRAMS, JIM  
Address: 271 LESLIE LANE  
City-St-Zip: LAKE MARY, FL 32746

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: KATHLEEN PACKER

P

03/17/2011

Electronic Signature of Signing Officer or Director

Date