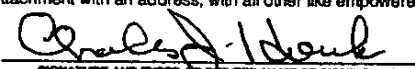


FILED
Feb 01, 2005 8:00 am
Secretary of State

[illegible]

DOCUMENT # N93000001282						Secretary of State 02-01-2005 90022 036 ****61.25	
1. Entity Name BOUCHELLE ISLAND X CONDOMINIUM ASSOCIATION, INC.				Principal Place of Business 406 BOUCHELLE DR NEW SMYRNA BEACH, FL 32169 US			
Mailing Address P.O. BOX 291973 PORT ORANGE, FL 32129 US							
2. Principal Place of Business		3. Mailing Address		01172005 Chg-NP CR2E037 (10/03)		4. FEI Number 59-3173608	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Applied For		Not Applicable	
City & State		City & State		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
Zip		Country		Zip		Country	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
BECKER & POLIAKOFF 2500 MAITLAND CENTER PARK SUITE 209 MAITLAND, FL 32751				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City			
				FL 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 the obligations of registered agent.							
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____							
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees		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 HOECK, CHARLES 406 COUCHELLE DR. 101 NEW SMYRNA BEACH, FL 32169 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		VPD VAN WYCK, WANDA 406 BOUCHELLE DRIVE #106 NEW SMYRNA BEACH, FL 32169 ☒ Delete		VPD William Needham 406 Bouchelle Dr #203 US B. FL 32169 ☐ Change ☐ Addition		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TD HALL, DONALD 406 BOUCHELLE DRIVE #205 NEW SMYRNA BEACH, FL 32169 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		S HOECK, MARY 406 BOUCHELLE DRIVE #101 NEW SMYRNA BEACH, FL 32169 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete		Dale Gruderman. 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 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 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: 				1/25/05			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date			
				Daytime Phone #			