2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2012
Secretary of State

DOCUMENT# N93000005272

Entity Name: BOUCHELLE ISLAND XV CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

434 BOUCHELLE DR.
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

Current Mailing Address:

C/O ATLANTIC COMM ASSOC MGMT & ACCTNG INC
507-C HERBERT STREET
PORT ORANGE, FL 32129

New Mailing Address:

FEI Number: 59-3212283 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YACEK, RENNY M
507-C HERBERT STREET
PORT ORANGE, FL 32129 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
Name: GOODLOE, JOHN
Address: 434 BOUCHELLE DR #103
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: STD
Name: BELLES, KATHRYN
Address: 434 BOUCHELLE DR #402
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VPD
Name: STAINTON-JAFFE, BERNARD
Address: 434 BOUCHELLE DR #204
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D
Name: SAVICH, SALLY
Address: 434 BOUCHELLE DRIVE #105
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: JOHN GOODLOE PD 02/08/2012

Electronic Signature of Signing Officer or Director Date