

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000768

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** BOULEVARD CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1595 SE PORT ST LUCIE BLVD  
PT ST LUCIE, FL 34952

**New Principal Place of Business:**

**Current Mailing Address:**

1595 SE PORT ST LUCIE BLVD  
PT ST LUCIE, FL 34952

**New Mailing Address:**

**FEI Number:** 65-0757487

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FARRELL, RICKEY L  
1595 SE PORT ST LUCIE BLVD  
PT ST LUCIE, FL 34952 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: DP ( ) Delete  
Name: FARRELL, RICKEY L  
Address: 1595 SE PT ST LUCIE BLVD  
City-St-Zip: PT ST LUCIE, FL 34952

Title: DST ( ) Delete  
Name: ESPIE, JANICE  
Address: 1599 SE PORT ST. LUCIE BLVD  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: D ( ) Delete  
Name: SCHAFER, MARTIN  
Address: 1597 SE PORT ST LUCIE BLVD  
City-St-Zip: PORT SAINT LUCIE, FL 34952

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: FARRELL, RICKEY L ESQ.  
Address: 1595 SE PT ST LUCIE BLVD  
City-St-Zip: PT ST LUCIE, FL 34952

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: ROWARS, RONALD ESQ.  
Address: 1597 SE PORT ST LUCIE BLVD  
City-St-Zip: PORT SAINT LUCIE, FL 34952

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RICKEY L. FARRELL

P

04/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date