

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004666

FILED
Apr 15, 2009
Secretary of State

Entity Name: "BOUCHELLE ISLAND XIX CONDOMINIUM ASSOCIATION, INC."

Current Principal Place of Business:

424 BOUCHELLE DR
NEW SMYRNA BCH, FL 32169

New Principal Place of Business:

424 BOUCHELLE DRIVE
NEW SMYRNA BCH, FL 32169

Current Mailing Address:

507-C HERBERT STREET
PORT ORANGE, FL 32129

New Mailing Address:

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

FEI Number: 59-3600010

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REIMER, R L
507-C HERBERT STREET
PORT ORANGE, FL 32129 US

Name and Address of New Registered Agent:

REIMER, R.L.
507-C HERBERT STREET
PORT ORANGE, FL 32129 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: R.L. REIMER

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WALTER, PYSTER
Address: 424 BOUCHELLE DR. #201
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VD () Delete
Name: OBANION, RAYMOND
Address: 424 BOUCHELLE DR #303
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: STD () Delete
Name: JACKSON, PAUL
Address: 424 BOUCHELLE DR. #305
City-St-Zip: NEW SMYRNA BEACH, FL 32169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SKATES, LAWRENCE
Address: 424 BOUCHELLE DR. #301
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VPD (X) Change () Addition
Name: MORGAN, MICHAEL
Address: 424 BOUCHELLE DR #204
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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

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: PAUL JACKSON

STD

04/15/2009

Electronic Signature of Signing Officer or Director

Date