

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002937

FILED  
Apr 13, 2009  
Secretary of State

**Entity Name:** BOUCHARD GARDENS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O ARGUS PROPERTY MANAGEMENT INC.  
2477 STICKNEY POINT RD.  
SARASOTA, FL 34231

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ARGUS PROPERTY MANAGEMENT INC.  
2477 STICKNEY POINT RD.  
SARASOTA, FL 34231

**New Mailing Address:**

**FEI Number:** 59-3593797

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CROSS, DARLENE  
C/O ARGUS PROPERTY MANAGEMENT INC.  
2477 STICKNEY POINT RD., SUITE 118A  
SARASOTA, FL 34231 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: VP ( ) Delete  
Name: BARKER, SANORA  
Address: 7412 BOTANICA PKWY  
City-St-Zip: SARASOTA, FL 34238

Title: ST ( ) Delete  
Name: SWAIN, DAVID  
Address: 5234 BARCHARD CIRCLE  
City-St-Zip: SARASOTA, FL 34238

Title: AS ( ) Delete  
Name: CROSS, DARLENE  
Address: 2477 SHIKNEY PE RD, SUITE 118A  
City-St-Zip: SARASOTA, FL 34231

Title: P ( ) Delete  
Name: CHRISTIANSEN, JOHN  
Address: 5246 BOUCHATL CIRCLE  
City-St-Zip: SARASOTA, FL 34238

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

Title: VP (X) Change ( ) Addition  
Name: BARKER, SANDRA  
Address: 7412 BOTANICA PKWY  
City-St-Zip: SARASOTA, FL 34238

Title: ST (X) Change ( ) Addition  
Name: SWAIN, DAVID  
Address: 5234 BOUCHARD CIRCLE  
City-St-Zip: SARASOTA, FL 34238

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

Title: P (X) Change ( ) Addition  
Name: CHRISTIANSEN, JOHN  
Address: 5246 BOUCHARD CIRCLE  
City-St-Zip: SARASOTA, FL 34238

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: DARLENE CROSS

AS

04/13/2009

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

\_\_\_\_\_  
Date