

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005774

FILED
Jan 05, 2012
Secretary of State

Entity Name: BOUCHELLE ISLAND XX CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

429 BOUCHELLE DR
NEW SMYRNA BEACH, FL 32169 US

New Principal Place of Business:

Current Mailing Address:

429 BOUCHELLE DR
NEW SMYRNA BEACH, FL 32169 US

New Mailing Address:

FEI Number: 59-3601085

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDERS, WILLIAM P
429 BOUCHELLE DRIVE
NEW SMYRNA BEACH, FL 32169 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: P
Name: SHARPE, MARK A
Address: 415 BOUCHELLE DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

Title: VP
Name: KIRKER, JAMES
Address: 433 BOUCHELLE DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

Title: D
Name: PERKINS, MYRNA
Address: 419 BOUCHELLE DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

Title: S&T
Name: SANDERS, WILLIAM P
Address: 429 BOUCHELLE DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

Title: D
Name: FALKNER, MERLE
Address: 421 BOUCHELLE DR
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

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: WILLIAM P. SANDERS

MR.

01/05/2012

Electronic Signature of Signing Officer or Director

Date