## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997

**BOCA GRANDE FL** 

SIEGLAFF, PETER

**BOCA GRANDE FL** 

**261 WATERWAYS AVE** 

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 29 1997 8:00am

Secretary of State

Change

Addition

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

720269

(0)

Mailing Address

GASPARILLA ISLAND CONSERVATION AND IMPROVEMENT A SSOCIATION, INC.

RM. 4. B.G.C.C. 1ST STREET RM. 4. B.G.C.C. 1ST STREET P. O. BOX 446 P. O. BOX 446 BOCA GRANDE FL 33921-0446 **BOCA GRANDE FL 33921**  Date Incorporated or Qualified 05/28/1971 3a. Date of Last Report 05/21/1996 Applied For 2a. Mailing Address 4. FEI Number 2. Principal Place of Business 23-7097778 Not Applicable 26 21 Sulte, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation has liability for intangible tax under s. 199.032, Zip Country Zip Yes No 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MURPHY, SAMUEL W Street Address (P.O. Box Number is Not Acceptable) 82 2610 SHORE LANE 83 **BOCA GRANDE FL 33921** Zip Code 84 City 85 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE 11 100 TITLE SHOLLEY, NANCY 12 NAME NAME 1120 11TH STREET 1.3 STREET ADDRESS STREET ADDRESS **BOCA GRANDE FL** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 21 TITLE TITLE SEARLES, ROBERT L. 2.2 NAME NAME Gambling, John 2943 SHORE LANE 2.3 STREE1 ADDRESS STREET ADDRESS 212 Waterways Ave. Boca Grande, FL 33921 **BOCA GRANDE FL** 2. 4 CITY - ST- ZIP CITY-ST-ZIP Addition DELETE Change 3.1 TITLE TITLE BISHOP, DORIS 3.2 NAME NAME RAILROAD AVENUE 3.3 STREET ADDRESS STREET ADDRESS **BOCA GRANDE, FL 00000** CITY-ST-ZIP 3.4. CITY-ST-ZIP Treasurer **K** Change X DELETE 41 TITLE Addition TITLE White, William B. ROBBINS, NATHANIEL 4.2 NAME NAME 293 Harbor Drive 1627 GASPAR DR S 4.3 STREET ADDRESS STREET ADDRESS Boca Grande, FL 33921 **BOCA GRANDE FL** 4.4 CITY - ST - ZIP CITY - ST - ZIP Change ☐ Addition DELETE 5.1 TITLE TITLE BURKE, CHRS. R 5.2 NAME NAME #12 SEAWATCH, GULF SHORES DRIVE 5.3 STREET ADDRESS STREET ADDRESS

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

941–964–2667 941-964-2667 /. n

DELETE

5.4 CITY - ST - ZIP

6.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME