

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746228

FILED  
Feb 20, 2012  
Secretary of State

**Entity Name:** BOCA GRANDE SHORES, INC.

**Current Principal Place of Business:**

500 GULF BLVD.  
BOCA GRANDE, FL 33921

**New Principal Place of Business:**

**Current Mailing Address:**

514 N. INDIANA AVE  
ENGLEWOOD, FL 34223

**New Mailing Address:**

**FEI Number:** 65-0574615

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ATRIUM CAM, INC  
514 N INDIANA AVE  
ENGLEWOOD, FL 34223 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: STD  
Name: OLDLAND, JOHN  
Address: 68 BALMORAL AVENUE  
City-St-Zip: TORONTO, CN M4V 1J4

Title: VPD  
Name: MCGRATH, TOM  
Address: 15 HAWTHORNE RD  
City-St-Zip: BARRINGTON, IL 60010

Title: PD  
Name: ANDERSEN, ROGER  
Address: 1215 CENTRAL AVE  
City-St-Zip: MUSKEGON, MI 49445

Title: D  
Name: HORNIG, DAVID  
Address: 1000 W 22ND STREET  
City-St-Zip: MINNEAPOLIS, MN 55405

Title: D  
Name: THOMPSON, PAUL  
Address: 2868 LAKESIDE STREET  
City-St-Zip: MADISON, WI 53711

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: ROGER ANDERSEN

PD

02/20/2012

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

\_\_\_\_\_  
Date