


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90427 033 ****61.25

DOCUMENT # N19463 1. Entity Name SEAWATCH OF BOCA GRANDE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business PO BOX 36 BOCA GRANDE, FL 33921 US			Mailing Address P O BOX 36 BOCA GRANDE, FL 33921 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0055190	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
THOMPSON, ROSS 16350 GULF SHORES DRIVE BOCA GRANDE, FL 33921				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>George P. Tilley, MD</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		Secretary Dr. George Tilley		4/26/2004 <small>DATE</small>	
Filing Fee is \$81.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	S	<input type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STOCHR, JAMES		NAME	STOEHR, JAMES	
STREET ADDRESS	7 WEEBATOOK		STREET ADDRESS		
CITY-ST-ZIP	CINCINNATI, OH 45208		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOEKZEMA, DOUGLAS		NAME	TILLEY, DR. GEORGE	
STREET ADDRESS	2807 PIONEER CLUB RD		STREET ADDRESS	31 MARVELLE ROAD	
CITY-ST-ZIP	E GRAND RAPIDS, MI 49506		CITY-ST-ZIP	FAYETTEVILLE, NY 13066-1017	
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SCHELDE, HOWARD		NAME	GEORGE CASTRUCCI	
STREET ADDRESS	11642 NORTH BLUFF ROAD		STREET ADDRESS	PO BOX 1669	
CITY-ST-ZIP	TRACERSE CITY, MI 49686		CITY-ST-ZIP	BOCA GRANDE, FL 33921	
TITLE	T	<input type="checkbox"/> Delete	TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMPSON, ROSS		NAME	THOMPSON, ROSS	
STREET ADDRESS	P.O. BOX 1975		STREET ADDRESS		
CITY-ST-ZIP	BOCA GRANDE, FL 33921		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MUNSELL, WILLIAM		NAME	MUNSELL, WILLIAM	
STREET ADDRESS	3155 PINNEY WOODS COURT S.E.		STREET ADDRESS		
CITY-ST-ZIP	CEDAR RAPIDS, IA		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOPPLE, JOHN		NAME	HEAD, JOE	
STREET ADDRESS	5235 IVY FARM ROAD		STREET ADDRESS	8855 CAMAGRO CLUB DRIVE	
CITY-ST-ZIP	CINCINNATI, OH 45243		CITY-ST-ZIP	CINCINNATI, OH 45243	
12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE <i>George P. Tilley, MD</i>		Secretary Dr. George Tilley		4/26/2004	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	