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NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N 95000002320

1. Corporation Name
BOCA GRANDE HISTORICAL SOCIETY, INC.

Principal Place of Business
BOCA GRANDE, FLORIDA

Mailing Address
P.O. BOX 775
BOCA GRANDE, FL 33921

3. Date Incorporated or Qualified: May 12, 1995
3a. Date of Last Report: APRIL 9, 1996

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

4. FEI Number: 65-0585091 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BUTLER, GAREY F., Esq.
HUMPHREY & KNOTT, P.A.
1625 HENDRY STREET
FORT MYERS, FL 33901

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 100002283631 -09/03/97--01031--012
84 City ***61.25 FL 85 Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CHAIRMAN OF THE BOARD	☐ DELETE	1.1 TITLE	DIRECTOR	☐ Change ☐ Addition
NAME	Theodore B. VanItallie, M.D.		1.2 NAME	JANICE BUSBY	
STREET ADDRESS	P.O. BOX 775, 1678 JOSE GASPAR DR.		1.3 STREET ADDRESS	10 BUNKER COURT	
CITY-ST-ZIP	BOCA GRANDE, FL 33921-0775		1.4 CITY-ST-ZIP	PLACIDA, FL 33947	
TITLE	DIRECTOR	☐ DELETE	2.1 TITLE	TREASURER	☐ Change ☒ Addition
NAME	PATRICIA AGLES		2.2 NAME	HOLBROOK R DAVIS	
STREET ADDRESS	P.O. BOX 1262, 371 GILCHRIST AVE.		2.3 STREET ADDRESS	P.O. BOX 1586, 711 PALM AVE.	
CITY-ST-ZIP	BOCA GRANDE, FL 33921		2.4 CITY-ST-ZIP	BOCA GRANDE, FL 33921	
TITLE	PRESIDENT	☒ DELETE	3.1 TITLE	~~PRESIDENT~~ DIRECTOR	☐ Change ☒ Addition
NAME	~~NANCY SHOLLEY~~		3.2 NAME	MRS. THOMAS C. COST, W10TH ST at GASPARILLA RD.	
STREET ADDRESS	P.O. BOX 1421, 1120 11TH ST		3.3 STREET ADDRESS	P.O. BOX 309	
CITY-ST-ZIP	BOCA GRANDE, FL 33921		3.4 CITY-ST-ZIP	BOCA GRANDE, FL 33921	
TITLE	DIRECTOR	☒ DELETE	4.1 TITLE	DIRECTOR	☐ Change ☐ Addition
NAME	~~RAYMOND T. SCHULER~~		4.2 NAME	DORIS BISHOP, 11 RAILROAD AVE.	
STREET ADDRESS	P.O. BOX 1420, 5000 GASPARILLA RD.		4.3 STREET ADDRESS	P.O. BOX 947	
CITY-ST-ZIP	BOCA GRANDE, FL 33921		4.4 CITY-ST-ZIP	BOCA GRANDE, FL 33921	
TITLE	VICE PRESIDENT	☒ DELETE	5.1 TITLE	DIRECTOR	☐ Change ☐ Addition
NAME	~~PETER SHOLLEY~~		5.2 NAME	MARGARET FUGATE	
STREET ADDRESS	P.O. BOX 1421, 1120 11TH ST		5.3 STREET ADDRESS	P.O. BOX 400, 950 PALM AVE.	
CITY-ST-ZIP	BOCA GRANDE, FL 33921		5.4 CITY-ST-ZIP	BOCA GRANDE, FL 33921	
TITLE	~~CHARLES~~ TREASURER	☒ DELETE	6.1 TITLE	DIRECTOR	☐ Change ☐ Addition
NAME	CHARLES AGLES, 371 GILCHRIST AVE.		6.2 NAME	FRANK WHITE	
STREET ADDRESS	P.O. BOX 1390		6.3 STREET ADDRESS	P.O. BOX 545, 351 TARPON AVE.	
CITY-ST-ZIP	BOCA GRANDE, FL 33921		6.4 CITY-ST-ZIP	BOCA GRANDE, FL 33921	

CR2E037 (9/96)

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.

JUNE TO NOV. 203-245-5945

SIGNATURE: Theodore B. VanItallie Chairman and Director July 29, 1997 941-964-0320
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

THEODORE B. VAN ITALLIE MD CHAIRMAN & DIRECTOR