

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 711470

**Entity Name:** GASPARILLA ISLAND WATER ASSOCIATION, INC.**Current Principal Place of Business:**1700 E. RAILROAD AVE.  
BOCA GRANDE, FL 33921**Current Mailing Address:**PO BOX 310  
BOCA GRANDE, FL 33921**FEI Number:** 59-1204602**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PRINGLE, BONNIE  
1700 E. RAILROAD AVE.  
BOCA GRANDE, FL 33921 US*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

**Officer/Director Detail :**

Title PD  
Name DIAZ, LESLIE  
Address 1604 JEAN LAFITTE  
City-State-Zip: BOCA GRANDE FL 33921

Title TD  
Name KOVACH, GASPER  
Address 2608 COVENTRY AVENUE  
City-State-Zip: LAKELAND FL 33803

Title D  
Name COURTNEY, TOM  
Address 760 EAST RAILROAD AVE  
City-State-Zip: BOCA GRANDE FL 33921

Title DIRECTOR  
Name KOVACH, GASPER  
Address 2608 COVENTRY AVE  
City-State-Zip: LAKELAND FL 33803

Title VPD  
Name MOORE, JEFF  
Address 361 GASPARILLA ST  
City-State-Zip: BOCA GRANDE FL 33921

Title D  
Name HEILMAN, ROBERT  
Address 5000 GASPARILLA ROAD  
City-State-Zip: BOCA GRANDE FL 33921

Title DIRECTOR  
Name MERRITT, JOHN  
Address P. O. BOX 1121  
City-State-Zip: BOCA GRANDE FL 33921

Title DIRECTOR  
Name HAGER, ARCHER  
Address 139 VICTOR STREET  
City-State-Zip: ST LOUIS MO 63104

**Continues on page 2**

*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: LESLIE DIAZ****PRESIDENT****04/20/2018**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	SECRETARY
Name	SPURGEON, SUSAN
Address	280 E. RAILROAD AVENUE
City-State-Zip:	BOCA GRANDE FL 33921