

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746228

Entity Name: BOCA GRANDE SHORES, INC.

FILED
Apr 14, 2017
Secretary of State
CC1860935829

Current Principal Place of Business:

C/O SILVERCRESTED MANAGEMENT
125 SW 3RD PLACE STE #207
CAPE CORAL, FL 33991

Current Mailing Address:

C/O SILVERCRESTED MANAGEMENT
P O BOX 1848
FORT MYERS, FL 33902 US

FEI Number: 65-0574615

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SILVERCRESTED MANAGEMENT
125 SW 3RD PLACE
STE #207
CAPE CORAL, FL 33991 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: MICHELLE THOMPSON, LCAM

04/14/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name MCGRATH, TOM
Address C/O SILVERCRESTED MANAGEMENT
 P O BOX 1848
City-State-Zip: FORT MYERS FL 33902

Title VP, DIRECTOR
Name THOMPSON, PAUL
Address C/O SILVERCRESTED MANAGEMENT
 P O BOX 1848
City-State-Zip: FORT MYERS FL 33902

Title SECRETARY, TREASURER,
 DIRECTOR
Name OLDLAND, JOHN
Address C/O SILVERCRESTED MANAGEMENT
 P O BOX 1848
City-State-Zip: FORT MYERS FL 33902

Title DIRECTOR
Name MOSER, CHRIS
Address C/O SILVERCRESTED MANAGEMENT
 P O BOX 1848
City-State-Zip: FORT MYERS FL 33902

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: TOM MCGRATH

PRESIDENT

04/14/2017

Electronic Signature of Signing Officer/Director Detail

Date