

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000001314

**Entity Name:** ISLAND GALLERY WEST, INC.**Current Principal Place of Business:**5368 GULF DR NORTH  
HOLMES BEACH, FL 34217**Current Mailing Address:**5368 GULF DR NORTH  
HOLMES BEACH, FL 34217 US**FEI Number:** 65-0400009**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MEARS, WILLIAM G  
7612 18TH AVENUE N.W.  
BRADENTON, FL 34209 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:** WILLIAM G MEARS

03/05/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            TREASURER, DIRECTOR  
Name            MEARS, WILLIAM G  
Address        7612 18TH AVENUE N.W.  
City-State-Zip: BRADENTON FL 34209

Title            DIRECTOR  
Name            SWANSON, SUSAN  
Address        904 CIMARRON CIRCLE  
City-State-Zip: BRADENTON FL 34209

Title            DIRECTOR  
Name            DEAN, SHIRLEY RUSH  
Address        8679 46TH AVENUE CIRCLE WEST  
City-State-Zip: BRADENTON FL 34210

Title            VP, DIRECTOR  
Name            WOELFLING, SHARRON LENNOX  
Address        350 CASTAWAY CAY DR #202  
City-State-Zip: BRADENTON FL 34209

Title            PRESIDENT, DIRECTOR  
Name            BOKUS, SUSAN  
Address        682 KEY ROYALE DRIVE  
City-State-Zip: HOLMES BEACH FL 34217

Title            SECRETARY  
Name            GROSSMAN, DONNA  
Address        343 WILDLIFE GLEN  
City-State-Zip: BRADENTON FL 34209

Title            DIRECTOR  
Name            ROGERS, TODD  
Address        4807 HARVEST GROVE PLACE  
City-State-Zip: PARRISH FL 34219

Title            DIRECTOR  
Name            FUGARDI, JAIME  
Address        7341 WEXFORD CT  
City-State-Zip: LAKEWOOD RANCH FL 34202

*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:** WILLIAM G MEARS

TREASURER

03/05/2021

Electronic Signature of Signing Officer/Director Detail

Date