

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002320

Entity Name: THE BOCA GRANDE HISTORICAL SOCIETY, INC.**Current Principal Place of Business:**170 PARK AVE
BOCA GRANDE, FL 33921**Current Mailing Address:**P. O. BOX 553
BOCA GRANDE, FL 33921**FEI Number:** 65-0585091**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KYLE, KIMBERLY S
170 PARK AVENUE
PO BOX 553
BOCA GRANDE, FL 33921-0553 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:** KIMBERLY S. KYLE

01/27/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TD
Name	MCCONNELL, CHED
Address	1629 JEAN LAFITTE DR. P.O. BOX 478
City-State-Zip:	BOCA GRANDE FL 33921

Title	S
Name	LOWE, PATRICIA
Address	1711 PELICAN COVE RD. GL444
City-State-Zip:	SARASOTA FL 34231

Title	VD
Name	LOWE, PATRICIA
Address	1711 PELICAN COVE RD. GL 444
City-State-Zip:	SARASOTA FL 34231

Title	ED
Name	KYLE, KIM
Address	9650 FIDDLERS GREEN CIR. U-114
City-State-Zip:	ROTONDA WEST FL 33947

Title	PD
Name	NESSER-AGLES, PATRICIA
Address	200 PILOT STREET PO BOX 1277
City-State-Zip:	BOCA GRANDE FL 33921-1277

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: KIM KYLE**EXECUTIVE DIRECTOR**

01/27/2016

Electronic Signature of Signing Officer/Director Detail

Date