

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 07, 2008 8:00 am**  
**Secretary of State**

02-07-2008 90011 017 \*\*\*\*61.25

**DOCUMENT # 706625**

1. Entity Name  
**BOCA GRANDE HEALTH CLINIC, INC.**



Principal Place of Business  
**P O BOX 517  
320 PARK AVENUE  
BOCA GRANDE, FL 33921**

Mailing Address  
**P O BOX 517  
320 PARK AVENUE  
BOCA GRANDE, FL 33921**

40013200



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01222008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number  
**59-0966089**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BUSBY, JANICE  
3RD ST & PARK AVE  
BOCA GRANDE, FL 33921**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

Make check payable to  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
HAYDEN, NANCY  
3575 SHORE LANE  
BOCA GRANDE, FL 33921** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**TREASURER  
BENNETT, MARCUS  
16440 GULF SHORES DR  
BOCA GRANDE, FL 33921** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**V  
BURCHAM, CYNTHIA  
191 DAMFIWEEL ST  
BOCA GRANDE, FL 33921** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**V  
JAMES AGGER  
1601 JEAN LAFITTE DR  
BOCA GRANDE, FL 33921** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**TR  
BISSELL, JOHN  
1616 TREASURE LN  
BOCA GRANDE, FL 33921** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S  
YVONNE ANDERSON  
16101 SUNSET PINES  
BOCA GRANDE, FL 33921** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
ANDERSON, YVONNE  
16101 SUNSET PINES  
BOCA GRANDE, FL 33921** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
SARAH FARISH  
1637 TREASURE LANE  
BOCA GRANDE FL 33921** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
BENNETT, MARCUS  
16440 GULF SHORES DR  
BOCA GRANDE, FL 33921** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
JOHN HILLENBRAND II  
5000 GASPARILLA ROAD  
BOCA GRANDE FL 33921** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S  
LEWIS, C.S.  
5700 GULF SHORES DR  
BOCA GRANDE, FL 33921** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
DIANE MAYER  
260 WATERWAYS AVE.  
BOCA GRANDE FL 33921** ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**GORDON G. NIDIFFER, MD.**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/08

Date

941-964-2276

Daytime Phone #

ATTACHMENT

40019260

# 706625

Boca Grande Health Clinic, Inc.  
Board of Directors (continued)

D

Donald C. Sullivan, M.D.  
4015 Shore Lane  
Boca Grande, FL 33921

D

Gordon G. Nidiffer  
Medical Director  
136 Carrick Bend  
Boca Grande, FL 33921

D

Henry L. Wright, M.D.  
Honorary Director  
141 Damficare Street  
Boca Grande, FL 33921