

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766694

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: BOCILLA ISLAND CLUB, INC.

## Current Principal Place of Business:

C/O PARAGON FINANCIAL SERVICES  
8280 COLLEGE PKWY #103  
FORT MYERS, FL 33919 US

## New Principal Place of Business:

## Current Mailing Address:

C/O PARAGON FINANCIAL SERVICES  
8280 COLLEGE PKWY #103  
FORT MYERS, FL 33919 US

## New Mailing Address:

FEI Number: 59-2265094

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CONRAD, DEBBIE  
PARAGON FINANCIAL SERVICES  
8280 COLLEGE PKWY, #103  
FORT MYERS, FL 33919 US

## Name and Address of New Registered Agent:

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

## OFFICERS AND DIRECTORS:

Title: DVPT ( ) Delete  
Name: KEYES, WILLIAM  
Address: 2828 SEABREEZE DR  
City-St-Zip: GULFPORT, FL 33707

Title: DS ( ) Delete  
Name: BLOOD, PETER D  
Address: P.O. BOX 226  
City-St-Zip: BOKEELIA, FL 33922

Title: D ( ) Delete  
Name: FOXWORTHY, RON  
Address: 1200 CHAMELEON WAY  
City-St-Zip: SARASOTA, FL 34241

Title: DP ( ) Delete  
Name: BLITZKO, JOSEPH A  
Address: 6127 PALOMINO CIRCLE  
City-St-Zip: UNIVERSITY PARK, FL 34201

Title: D ( ) Delete  
Name: WATSON, DAVID  
Address: 3 DOGWOOD LANE  
City-St-Zip: CLARKSVILLE, TN 37043

Title: D (X) Delete  
Name: HAUBENREICH, JOHN G  
Address: 56 PERIMETER CENTER EAST #450  
City-St-Zip: ATLANTA, GA 30346

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPT (X) Change ( ) Addition  
Name: KEYES, WILLIAM  
Address: 2828 SEABREEZE DR  
City-St-Zip: GULFPORT, FL 33707

Title: SD (X) Change ( ) Addition  
Name: BLOOD, PETER D  
Address: P.O. BOX 226  
City-St-Zip: BOKEELIA, FL 33922

Title: D (X) Change ( ) Addition  
Name: WHEATON, DAVID  
Address: 16650 BOCILLA ISLAND CLUB J54  
City-St-Zip: BOKEELIA, FL 33922

Title: PD (X) Change ( ) Addition  
Name: HAUBENREICH, JOHN  
Address: 16709 BOCILLA PALMS DR #D22  
City-St-Zip: BOKEELIA, FL 33922

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: WILLIAM KEYES

VPT

03/30/2009

Electronic Signature of Signing Officer or Director

Date