2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007
Secretary of State

DOCUMENT# N01000007342

Entity Name: BOCA GRANDE PASS ENHANCEMENT FUND, INC.

Current Principal Place of Business:

4913 WORMAN ST.
TAMPA, FL 33613

New Principal Place of Business:

Current Mailing Address:

PO BOX 3343
PLACIDA, FL 33946

New Mailing Address:

P.O. BOX 677
BOCA GRANDE, FL 33921

FEI Number: 65-1148501 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARKETT, DAVIS L
14913 WORMAN ST.
TAMPA, FL 33613 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: VD ( ) Delete
Name: MARKETT, DAVIS L
Address: 14913 WORMAN ST.
City-St-Zip: TAMPA, FL 33613

Title: SD ( ) Delete
Name: ITALIANO, NELSON A
Address: PO BOX 1406
City-St-Zip: BOCA GRANDE, FL 33921

Title: D ( ) Delete
Name: WEST, CHUCK
Address: 10836 POND RIDGE DR.
City-St-Zip: FORT MYERS, FL 33913

Title: PD ( ) Delete
Name: WASNO, BOB
Address: 3406 PALM BEACH BLVD.
City-St-Zip: FORT MYERS, FL 33916

Title: TD ( ) Delete
Name: KLINGEL, WALTER
Address: P.O. BOX 677
City-St-Zip: BOCA GRANDE, FL 33921

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: WALTER C. KLINGEL, JR T 04/09/2007
Electronic Signature of Signing Officer or Director — Date