## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # N02318

BOCA GRANDE NORTH CONDOMINIUM ASSOCIATION,



**FILED** 

Jan 08, 2007 8:00 am Secretary of State 01-08-2007 90253 024 \*\*\*\*61.25

6020 BOCA GRANDE CSWY. PO				Mailing Address PO BOX 97 BOCA GRANDE, FL 33921-1043 US						- 17 intan irii	8/8/1 <b>/</b> 13/1 <b>/</b> 18	II 81811 31811 B	NOTIHOL OF LINGT
Principal Place of Business - No P.O. Box #     Address													
Suite, Apt. #, etc.			Suite, Apt. #, etc.				01042007	Chg-NP		CR2E03	37 (12/06)		
City & State			City & State				4. FEI Numbe 57-081				-	Applied For Not Applicable	
Zip				Zip Cou			5. Certificate of Status Desired \$8.75 Additional Fee Required						
	6. Name	nt Registere	Registered Agent				7. Name and	Address o	f New Ro	egistered /	Agent		
GRANDE ISLAND VACATIONS INC						Name		-					
	A GRAND	E CAUSEWAY				Street Address (P.O. Box Number is Not Acceptable)							
						City						Žip Co	de
<u> </u>		<del></del>	<u> </u>								FL	<u> </u>	
<ul> <li>8. The above</li> <li>the obligation</li> </ul>	named entity ions of registe	submits this statement ered agent.	for the purpo	ose of changing its	registere	ed office or	r register	ed agent, or bot	th, in the Sta	ate of Flo	rida. Lam	familiar with	n, and accept
 SIGNATURE _													
	Signature, typed o	or printed name of registered age	ent and title if app	licable. (NOTE	: Registered	1 Agent signat	ure required	when reinstating)			DATE		
						inanalna	9 \$5.00 May Re Make check payable to					<u></u>	
		e is <b>\$</b> 61.25		<ol><li>Election Can</li></ol>	npaign m			\$5.00 May B	te l	PH:	ake cneci	payable	
•	Due by M	lay 1, 2007		Trust Fund C	Contributi	on.		Added to Fees		Flori	da Depar	tment of	State
10.		OFFICERS AND E	DIRECTORS	Trust Fund C	Contributi	on.							
10. TITLE	TD	OFFICERS AND E	DIRECTORS	Trust Fund C	11.			Added to Fees ADDITIONS/CH.					
TITLE NAME	TD LOSEE, S	OFFICERS AND E	DIRECTORS		11. TITLE		D Eliat	Added to Fees  ADDITIONS/CH.				RECTORS I	N 10
10. TITLE NAME STREET ADDRESS	TD LOSEE, S P.O. BOX	OFFICERS AND E TEVEN 483	DIRECTORS		11. TITLE NAME STREE	ET ADDRESS	Elliot P.S. B	Added to Fees ADDITIONS/CH.  t. Robert  X 483	ANGES TO			RECTORS I	N 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LOSEE, S P.O. BOX BOCA GR	OFFICERS AND E	DIRECTORS	Delete	11. TITLE NAME STREE	ET ADDRESS ST-ZIP	Elliot P.S. B	Added to Fees  ADDITIONS/CH.	ANGES TO			RECTORS I	N 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	TD LOSEE, S P.O. BOX BOCA GR SD	OFFICERS AND E TEVEN 483 ANDE, FL 33921	DIRECTORS		11. TITLE NAME STREE CITY-	ET ADDRESS ST-ZIP	Elliot P.O. B Boca G	Added to Fees ADDITIONS/CH.  t, Robert ex 483 trande, FC.	ANGES TO			RECTORS I	N 10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LOSEE, S P.O. BOX BOCA GR SD FERGUSO	OFFICERS AND E TEVEN 483 ANDE, FL 33921	DIRECTORS	Delete	11. TITLE NAME STREE CITY- TITLE	ET ADDRESS ST-ZIP	Ellist P.S. B Boca G Mitche	Added to Fees ADDITIONS/CH.  t, Robert ox 483 irande, FC.  11. John St	ANGES TO			RECTORS I	N 10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	TD LOSEE, S P.O. BOX BOCA GR SD FERGUSO 11 LIVERN	OFFICERS AND E TEVEN 483 ANDE, FL 33921 ON, JEAN	DIRECTORS	Delete	11. TITLE NAME STREE CITY- TITLE NAME STREE	ET ADORESS ST-ZIP	Elliot P.S. B Boca G Mitche 901 A	Added to Fees  ADDITIONS/CH.	ANGES TO			RECTORS I	N 10
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	TD LOSEE, S P.O. BOX BOCA GR SD FERGUSO 11 LIVERN	OFFICERS AND E TEVEN 483 ANDE, FL 33921 ON, JEAN MORE LANE	DIRECTORS	Delete	11. TITLE NAME STREE CITY- TITLE NAME STREE	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	Elliot P.S. B Boca G Mitche 901 A	Added to Fees ADDITIONS/CH.  t, Robert ox 483 irande, FC.  11. John St	ANGES TO			Change	N 10  Addition  Addition
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	TD LOSEE, S' P.O. BOX BOCA GR SD FERGUSC 11 LIVERM WESTON,	OFFICERS AND E TEVEN 483 ANDE, FL 33921 ON, JEAN MORE LANE MA 024931186	DIRECTORS	Delete	11. TITLE NAME STREE CITY- TITLE NAME STREE CITY-	ET ADDRESS ST-ZIP ET ADDRESS :ST-ZIP	Elliot P.S. B Boca G Mitche 901 A	Added to Fees  ADDITIONS/CH.	ANGES TO			RECTORS I	N 10
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	TD LOSEE, S' P.O. BOX BOCA GR. SD FERGUSC 11 LIVERM WESTON, PD LUSK, JEF P.O. BOX	OFFICERS AND E TEVEN 483 ANDE, FL 33921 DN, JEAN MORE LANE MA 024931186 RRY 1018	DIRECTORS	Delete	11. TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	Elliot P.S. B Boca G Mitche 901 A	Added to Fees  ADDITIONS/CH.	ANGES TO			Change	N 10  Addition  Addition
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	TD LOSEE, S' P.O. BOX BOCA GR. SD FERGUSC 11 LIVERM WESTON, PD LUSK, JEF P.O. BOX	OFFICERS AND E TEVEN 483 ANDE, FL 33921 ON, JEAN MORE LANE MA 024931186	DIRECTORS	Delete	11. TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	Elliot P.S. B Boca G Mitche 901 A	Added to Fees  ADDITIONS/CH.	ANGES TO			Change	N 10  Addition  Addition
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	TD LOSEE, S' P.O. BOX BOCA GR. SD FERGUSC 11 LIVERM WESTON, PD LUSK, JEF P.O. BOX BOCA GR. VD	OFFICERS AND E TEVEN 483 ANDE, FL 33921 DN, JEAN MORE LANE MA 024931186 RRY 1018 ANDE, FL 33921	DIRECTORS	Delete	11. TITLE NAME STREI CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	Elliot P.S. B Boca G Mitche 901 A	Added to Fees  ADDITIONS/CH.	ANGES TO			Change	N 10  Addition  Addition
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	TD LOSEE, S' P.O. BOX BOCA GR SD FERGUSO 11 LIVERM WESTON, PD LUSK, JEF P.O. BOX BOCA GR VD FLAHERT	OFFICERS AND E TEVEN 483 ANDE, FL 33921 DN, JEAN MORE LANE MA 024931186 RRY 1018 ANDE, FL 33921 Y, JOY	DIRECTORS	Delete Delete	11. TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE CITY	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	Elliot P.S. B Boca G Mitche 901 A	Added to Fees  ADDITIONS/CH.	ANGES TO			RECTORS I Change Change	N 10  Addition  Addition
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	TD LOSEE, S' P.O. BOX BOCA GR SD FERGUSO 11 LIVERM WESTON, PD LUSK, JEF P.O. BOX BOCA GR VD FLAHERT 2505 E. 40	OFFICERS AND E TEVEN 483 ANDE, FL 33921 DN, JEAN MORE LANE MA 024931186 RRY 1018 ANDE, FL 33921 Y, JOY DTH ST.	DIRECTORS	Delete Delete	11. TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE STREE	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	Elliot P.S. B Boca G Mitche 901 A	Added to Fees  ADDITIONS/CH.	ANGES TO			RECTORS I Change Change	N 10  Addition  Addition
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	TD LOSEE, S' P.O. BOX BOCA GR SD FERGUSO 11 LIVERN WESTON, PD LUSK, JEF P.O. BOX BOCA GR. VD FLAHERT 2505 E. 40 DAVENPO	OFFICERS AND E TEVEN 483 ANDE, FL 33921 DN, JEAN MORE LANE MA 024931186 RRY 1018 ANDE, FL 33921 Y, JOY	DIRECTORS	Delete  Delete  Delete	11. TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY-	ET ADDRESS ST-ZIP	Elliot P.S. B Boca G Mitche 901 A	Added to Fees  ADDITIONS/CH.	ANGES TO			RECTORS I Change Change Change	N 10  Addition  Addition  Addition
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	TD LOSEE, S' P.O. BOX BOCA GR SD FERGUSO 11 LIVERN WESTON, PD LUSK, JEF P.O. BOX BOCA GR. VD FLAHERT 2505 E. 40 DAVENPO D	OFFICERS AND E TEVEN 483 ANDE, FL 33921  ON, JEAN MORE LANE MA 024931186  RRY 1018 ANDE, FL 33921  Y, JOY OTH ST. ORT, IA 52807	DIRECTORS	Delete Delete	11. TITLE NAME STREE CITY-	ET ADDRESS ST-ZIP	Elliot P.S. B Boca G Mitche 901 A	Added to Fees  ADDITIONS/CH.	ANGES TO			RECTORS I Change Change	N 10  Addition  Addition
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	TD LOSEE, S' P.O. BOX BOCA GR SD FERGUSO 11 LIVERN WESTON, PD LUSK, JEF P.O. BOX BOCA GR. VD FLAHERT 2505 E. 40 DAVENPO	OFFICERS AND E TEVEN 483 ANDE, FL 33921 DN, JEAN MORE LANE MA 024931186 RRY 1018 ANDE, FL 33921 Y, JOY DTH ST. DRT, IA 52807 YALE	DIRECTORS	Delete  Delete  Delete	11. TITLE NAME STREE CITY-	ET ADDRESS ST-ZIP	Elliot P.S. B Boca G Mitche 901 A	Added to Fees  ADDITIONS/CH.	ANGES TO			RECTORS I Change Change Change	N 10  Addition  Addition  Addition
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	TD LOSEE, S' P.O. BOX BOCA GR SD FERGUSO 11 LIVERM WESTON, PD LUSK, JEF P.O. BOX BOCA GR VD FLAHERT 2505 E. 40 DAVENPO D KRAMOR, 2004 80TH	OFFICERS AND E TEVEN 483 ANDE, FL 33921 DN, JEAN MORE LANE MA 024931186 RRY 1018 ANDE, FL 33921 Y, JOY DTH ST. DRT, IA 52807 YALE	DIRECTORS	Delete  Delete  Delete	11. TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE STREE CITY	ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	Elliot P.S. B Boca G Mitche 901 A	Added to Fees  ADDITIONS/CH.	ANGES TO			RECTORS I Change Change Change	N 10  Addition  Addition  Addition
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	TD LOSEE, S' P.O. BOX BOCA GR SD FERGUSO 11 LIVERM WESTON, PD LUSK, JEF P.O. BOX BOCA GR VD FLAHERT 2505 E. 40 DAVENPO D KRAMOR, 2004 80TH	OFFICERS AND E TEVEN 483 ANDE, FL 33921 DN, JEAN MORE LANE MA 024931186 RRY 1018 ANDE, FL 33921 Y, JOY DTH ST. DRT, IA 52807 YALE 1 ST	DIRECTORS	Delete  Delete  Delete	11. TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE STREE CITY	ET ADDRESS ST-ZIP	Elliot P.S. B Boca G Mitche 901 A	Added to Fees  ADDITIONS/CH.	ANGES TO			RECTORS I Change Change Change	N 10  Addition  Addition  Addition
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	TD LOSEE, S' P.O. BOX BOCA GR SD FERGUSO 11 LIVERM WESTON, PD LUSK, JEF P.O. BOX BOCA GR VD FLAHERT 2505 E. 40 DAVENPO D KRAMOR, 2004 80TH	OFFICERS AND E TEVEN 483 ANDE, FL 33921 DN, JEAN MORE LANE MA 024931186 RRY 1018 ANDE, FL 33921 Y, JOY DTH ST. DRT, IA 52807 YALE 1 ST	DIRECTORS	Delete  Delete  Delete	11. TITLE NAME STREE CITY-	ET ADDRESS ST-ZIP	Elliot P.S. B Boca G Mitche 901 A	Added to Fees  ADDITIONS/CH.	ANGES TO			RECTORS I Change Change Change Change	N 10  Addition  Addition  Addition
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE	TD LOSEE, S' P.O. BOX BOCA GR SD FERGUSO 11 LIVERM WESTON, PD LUSK, JEF P.O. BOX BOCA GR VD FLAHERT 2505 E. 40 DAVENPO D KRAMOR, 2004 80TH	OFFICERS AND E TEVEN 483 ANDE, FL 33921 DN, JEAN MORE LANE MA 024931186 RRY 1018 ANDE, FL 33921 Y, JOY DTH ST. DRT, IA 52807 YALE 1 ST	DIRECTORS	Delete  Delete  Delete	11. TITLE NAME STREE CITY- TITLE NAME STREE STREE CITY-	ET ADDRESS ST-ZIP	Elliot P.S. B Boca G Mitche 901 A	Added to Fees  ADDITIONS/CH.	ANGES TO			RECTORS I Change Change Change Change	N 10  Addition  Addition  Addition

I nereby 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 tike empowered.

SIGNATURE:

PRINTED NAME OF BIGNING OFFICER OR DIRECTOR