

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90370 043 ****70.00

DOCUMENT # N03000003017

1. Entity Name

BOCA GRANDE HEALTH CLINIC FOUNDATION, INC.



Principal Place of Business

320 PARK AVENUE
BOCA GRANDE FL 33921

Mailing Address

P.O. BOX 2340
BOCA GRANDE FL 33921



2. Principal Place of Business

375 Park Avenue

3. Mailing Address

Suite, Apt. #, etc.

Suite #2

City & State

Boca Grande, FL

City & State

Zip

Country

33921

USA

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

57-1160149

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BUSBY, JANICE
320 PARK AVENUE
BOCA GRANDE FL 33921

7. Name and Address of New Registered Agent

Name Michael F. Dacey

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

375 Park Avenue

City

Boca Grande

FL

Zip

33921

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 reappointing)

DATE

Michael F. Dacey

2/23/06

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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

TITLE D ☒ Delete
NAME NIelsen, RICHARD A
STREET ADDRESS 1764 JOSE GASPAR DRIVE
CITY-ST-ZIP BOCA GRANDE FL 33921

TITLE D ☐ Delete
NAME FREDERICK, ROBERT
STREET ADDRESS 4515 SHORE LANE
CITY-ST-ZIP BOCA GRANDE FL 33921

TITLE D ☐ Delete
NAME BISSELL, JOHN
STREET ADDRESS 1616 TREASURE LANE
CITY-ST-ZIP BOCA GRANDE FL 33921

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME Dacey, Michael F.
STREET ADDRESS 459 Blue Teal Drive
CITY-ST-ZIP Boca Grande, FL 33921

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/06

DIRECTOR

Daytime Phone #