

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17862

FILED  
Feb 23, 2010  
Secretary of State

**Entity Name:** FRIENDS OF BOCA GRANDE COMMUNITY CENTER, INC.

**Current Principal Place of Business:**

C/O MARIELA M. CAMARA  
FIRST STREET AND PARK AVENUE  
BOCA GRANDE, FL 33921

**New Principal Place of Business:**

131 FIRST STREET WEST  
BOCA GRANDE, FL 33921

**Current Mailing Address:**

PO BOX 1222  
BOCA GRANDE, FL 33921 US

**New Mailing Address:**

**FEI Number:** 59-2818741      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEO WOTITZKY  
% WOTITZKY, WOTITZKY, WILKINS, FROHLICH  
201 WEST MARION AVENUE SUITE 301  
PUNTA GORDA, FL 33950 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: TRD  
Name: GOETCHEUS, JOHN TREASUR  
Address: BEACH MANOR #313  
City-St-Zip: BOCA GRANDE, FL 33921

Title: SEC  
Name: BROCK, MITCHELL SECRETA  
Address: 323 PILOT POINT LANE  
City-St-Zip: BOCA GRANDE, FL 33921

Title: PTD  
Name: CHAPMAN, PATRICIA L  
Address: 9801 GASPARILLA PASS BOULEVARD  
City-St-Zip: BOCA GRANDE, FL 33921

Title: VPD  
Name: ALEY, LINDA  
Address: 16191 N. ISLAND COURT  
City-St-Zip: BOCA GRANDE, FL 33921

Title: OD  
Name: KISSINGER, JOHN  
Address: 820 S. HARBOR DRIVE  
City-St-Zip: BOCA GRANDE, FL 33921

Title: OD  
Name: ROBBINS, ROSS C  
Address: 295 PILOT POINT LANE  
City-St-Zip: BOCA GRANDE, FL 33921

I hereby 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 all other like empowered.

SIGNATURE: DARRYL J. KEISLING

AA

02/23/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date