



2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2005 08:00 AM
Secretary of State

DOCUMENT # N20572 1. Entity Name THE VILLAGE OF BOCA GRANDE CLUB CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 5000 GASPARILLA ROAD P O BOX 810 BOCA GRANDE, FL 33921 US	Mailing Address C/O BOCA GRANDE CLUB P O BOX 810 BOCA GRANDE, FL 33921 US
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DO NOT WRITE IN THIS SPACE

	
03232005 No Chg-NP	CR2E037 (10/03)
4. FEI Number 65-0015967	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BOCA GRANDE HOMEOWNERS ASSOCIATION, INC. DBA BOCA GRANDE CLUB 5000 GASPARILLA RD. BOCA GRANDE, FL 33921	<p style="text-align: center; font-size: 24pt; font-weight: bold;">DO NOT WRITE IN THIS SPACE</p>
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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP STD FITZGERALD, ANN 5000 GASPARILLA RD. BOCA GRANDE, FL 33921	<p style="text-align: center; font-size: 24pt; font-weight: bold;">DO NOT WRITE IN THIS SPACE</p>
TITLE NAME STREET ADDRESS CITY-ST-ZIP PD VANDENBERG, FRED E. 5001 GASPARILLA RD BOCA GRANDE, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP VD HAGERTY, FRANK 5000 GASPARILLA ROAD BOCA GRANDE, FL 33921	
TITLE NAME STREET ADDRESS CITY-ST-ZIP AS CLOTFELTER, CHARLES 5000 GASPARILLA RD. BOCA GRANDE, FL 33921	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D JACOBS, GENE 5000 GASPARILLA RD. BOCA GRANDE, FL 33921	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D SLINNERS, MICHAEL 5000 GASPARILLA RD. BOCA GRANDE, FL 33921	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Charles Clotfelter **CHARLES CLOTFELTER** 3/29/05 941 964-2211
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR