

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000004962

**FILED**  
**Jan 27, 2015**  
**Secretary of State**  
**CC5761796555**

**Entity Name:** GRAND ISLE AT SEAGROVE BEACH, INC.

**Current Principal Place of Business:**

4281 E. COUNTY HWY 30 A  
#8  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

4281 E. COUNTY HWY 30 A  
#8  
SANTA ROSA BEACH, FL 32459

**FEI Number: 32-0083323**

**Certificate of Status Desired: No**

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

COFFIELD, P. COLLEEN  
1394 COUNTY HIGHWAY 283 S BLDG 4  
SANTA ROSA BCH, FL 32459 US

*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

**Officer/Director Detail :**

Title D  
Name BAKANE, MARK  
Address 4281 E HWY 30-A #8  
City-State-Zip: SANTA ROSA BEACH FL 32459

Title D  
Name RYMER, TOM  
Address 4281 EAST CO. HWY, 30A  
City-State-Zip: SANTA ROSA BCH FL 32459

Title D  
Name QUILLEN, MIKE  
Address 4215 GLENWOOD AVE  
City-State-Zip: BIRMINGHAM AL 35222

*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: MARK BAKANE**

**DIRECTOR**

**01/27/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date