

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000008259

Entity Name: WEST BAY COMMUNITY CHARITABLE FOUNDATION, INC.**Current Principal Place of Business:**4606 WEST BAY BLVD.
ESTERO, FL 33928**Current Mailing Address:**4606 WEST BAY BLVD.
ESTERO, FL 33928**FEI Number:** 47-1584850**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**POLLARD, FRANK R
20391 CHAPEL TRACE
ESTERO, FL 33928 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:** FRANK R. POLLARD

01/24/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name CHENSOFF, GAIL
Address 22050 NATURES COVE COURT
City-State-Zip: ESTERO FL 33928

Title DIRECTOR
Name ROBERT, WILSON
Address 22172 NATURES COVE COURT
City-State-Zip: ESTERO FL 33928

Title DIRECTOR, SECRETARY
Name GUNNELS, LESLIE
Address 22049 NATURES COVE COURT
City-State-Zip: ESTERO FL 33928

Title DIRECTOR, PRESIDENT
Name HALEY, ANNE
Address 5061 INDIGO BAY BLVD. #202
City-State-Zip: ESTERO FL 33928

Title TREASURER, DIRECTOR
Name POLLARD, FRANK
Address 20391 CHAPEL TRACE
City-State-Zip: ESTERO FL 33928

Title DIRECTOR
Name SMITH, WAYNE
Address 4751 WEST BAY BLVD. #1604
City-State-Zip: ESTERO FL 33928

Title DIRECTOR, VICE PRESIDENT
Name CARBONE, KATHLEEN
Address 20271 CHAPEL TRACE
City-State-Zip: ESTERO FL 33928

Title DIRECTOR
Name KELLEY, KAREN
Address 4671 WEST BAY BOULEVARD
#502
City-State-Zip: ESTERO FL 33928

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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: FRANK R. POLLARD

TREASURER

01/24/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SKINNER, NANCY
Address 22292 NATRUES COVE COURT
City-State-Zip: ESTERO FL 33928

Title DIRECTOR
Name ERICKSON, MICHAEL
Address 20070 CHAPEL TRACE
City-State-Zip: ESTERO FL 33928

Title DIRECTOR
Name HAZEN, DOROTHY
Address 20040 RIVERBROOKE RUN
City-State-Zip: ESTERO FL 33928

Title DIRECTOR
Name HARPER, GLEN
Address 20330 CHAPEL TRACE
City-State-Zip: ESTERO FL 33928

Title DIRECTOR
Name VESCE, STEVE
Address 19781 CHAPEL TRACE
City-State-Zip: ESTERO FL 33928