

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N35104

**Entity Name:** BARRIER ISLAND PARKS SOCIETY, INC.**Current Principal Place of Business:**880 BELCHER ROAD  
PO BOX 637  
BOCA GRANDE, FL 33921-0637**Current Mailing Address:**P.O. BOX 637  
BOCA GRANDE, FL 33921 US**FEI Number:** 65-0327405**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BARRIER ISLAND PARKS SOCIETY, INC.  
880 BELCHER STREET  
P.O. BOX 637  
BOCA GRANDE, FL 33921 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:** SHARON R. MCKENZIE

03/19/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name KEWLEY, CLIF  
Address 117 SMALL STREET  
City-State-Zip: PORT CHARLOTTE FL 33952

Title DIRECTOR  
Name O'CONNELL, DAN  
Address P.O. BOX 1678  
City-State-Zip: BOCA GRANDE FL 33921

Title DIRECTOR  
Name MCDONALD, JAY  
Address P.O. BOX 1403  
City-State-Zip: BOCA GRANDE FL 33921

Title DIRECTOR  
Name SHERWOOD, PETER  
Address PO BOX 1879  
City-State-Zip: BOCA GRANDE FL 33921

Title DIRECTOR  
Name HOOKER, MARY ANN  
Address 218 PILOT STREET  
P.O. BOX 402  
City-State-Zip: BOCA GRANDE FL 33921

Title EXECUTIVE DIRECTOR  
Name MCKENZIE, SHARON  
Address P.O. BOX 1755  
City-State-Zip: BOCA GRANDE FL 33921

Title DIRECTOR  
Name MCLAUGHLIN, ELAINE  
Address 5400 ANN ARBOR DRIVE  
City-State-Zip: BOKEELIA FL 33922

Title DIRECTOR  
Name WILCOX, TOM  
Address P.O. BOX 1653  
City-State-Zip: BOCA GRANDE FL 33921

**Continues on page 2**

*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:** SHARON MCKENZIE

EXECUTIVE DIRECTOR

03/19/2019

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name WITSCHONKE, ROSS  
Address 50 BUCCANEER ROAD  
City-State-Zip: PLACIDA FL 33946

Title DIRECTOR  
Name RICE, JOHN  
Address P.O. BOX 538  
City-State-Zip: BOCA GRANDE FL 33921

Title SECRETARY  
Name WHITNEY, NANCY  
Address P.O. BOX 1578  
City-State-Zip: BOCA GRANDE FL 33921

Title PRESIDENT  
Name POTTHAST-HAYNES, KRISTA  
Address PO BOX 2553  
City-State-Zip: BOCA GRANDE FL 33921

Title DIRECTOR  
Name BALLMAN, GARY  
Address PO BOX 577  
City-State-Zip: BOCA GRANDE FL 33921-0577

Title DIRECTOR  
Name KNIGHT, JOHNS  
Address 15161 LAKELAND CIRCLE  
City-State-Zip: PORT CHARLOTTE FL 33981

Title DIRECTOR  
Name GRANT, LYNDIA  
Address 11200 HACIENDA DEL MAR  
BOULEVARD #301  
City-State-Zip: PLACIDA FL 33946

Title TREASURER  
Name SOMMERVILLE, ROBERT  
Address P.O. BOX 1022  
City-State-Zip: BOCA GRANDE FL 33921

Title DIRECTOR  
Name KLEPSE, RICHARD  
Address 13113 GASPARILLA ROAD  
#202  
City-State-Zip: PLACIDA FL 33946

Title DIRECTOR  
Name WIGGIN, DAN  
Address PO BOX 992  
City-State-Zip: BOCA GRANDE FL 33921

Title DIRECTOR  
Name KISSINGER, JOHN  
Address PO BOX 2159  
City-State-Zip: BOCA GRANDE FL 33921-2159