FEI Number: 22-3729281			Certificate of Status Desired: No		
Name and Address of Current Registered Agent:					
CHESKE, KACY 15953 AQUA CIRCE PORT CHARLOTTE, FL 33981 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	: KACY CHESKE			04/26/2022	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	DIRECTOR	Title	DIRECTOR		
Name	COLEMAN, HARRY	Name	WILLIAM, WOODROFFE		
Address	130326 PACIFIC ROAD	Address	PO BOX 100		
City-State-Zip:	ARCH CAPE OR 97102	City-State-Zip:	BOCA GRANDE FL 33921		
Title	DIRECTOR	Title	D		
Name	NAPOLI, CAROL	Name	ITALIANO, NELSON		
Address	764 BEACH VIEW DRIVE	Address	P.O. BOX 100		
City-State-Zip:	BOCA GRANDE FL 33921	City-State-Zip:	BOCA GRANDE FL 33921		
Title	DIRECTOR	Title	PRESIDENT, VP		
Name	GODWIN, DANIEL	Name	JOINER, BETSY		
Address	190 E 1ST STREET	Address	PO BOX 100		
City-State-Zip:	BOCA GRANDE FL 33921	City-State-Zip:	BOCA GRANDE FL 33921		
Title	TREASURER	Title	DIRECTOR		
Name	SCARPA, DEBORAH A	Name	DELAVERGNE, JOHN		
Address	P.O. BOX 1608	Address	P.O. BOX 100		
City-State-Zip:	BOCA GRANDE FL 33921	City-State-Zip:	BOCA GRANDE FL 33921		

2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0000003745

Entity Name: GASPARILLA ISLAND MARITIME MUSEUM, INC.

Current Principal Place of Business:

190 E 1ST STREET BOCA GRANDE, FL 33921

Current Mailing Address:

PO BOX 100 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: KACY CHESKE

SECRETARY

04/26/2022

Electronic Signature of Signing Officer/Director Detail

FILED Apr 26, 2022 **Secretary of State** 6076395281CC

Officer/Director Detail Continued :

Title	SECRETARY
Name	CHESKE, KACY
Address	15953 AQUA CIRCLE
City-State-Zip:	PORT CHARLOTTE FL 33981