

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 08, 2006 8:00 am
Secretary of State

06-08-2006 90003 025 ****61.25

DOCUMENT # N18833 1. Entity Name THE CALEDONIAN CLUB OF FLORIDA WEST, INC.					
Principal Place of Business P O BOX 19281 SARASOTA, FL 34276			Mailing Address P O BOX 19281 SARASOTA, FL 34276		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-2822003	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent OSBORNE, DONALD 6246 WILLET CT BRADENTON, FL 34202				7. Name and Address of New Registered Agent Name Ron MacCartney Street Address (P.O. Box Number is Not Acceptable) 2048 TIMUCUA TRAIL City NOKOMIS FL 34275	
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 Ron MacCartney Ron MacCartney 6/5/06 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)					
Filing Fee is \$61.25 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LAWS, DAVID 3741 SURREY LANE SARASOTA, FL 34235	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D MOIR, SUSAN 5009 45TH STREET W BRADENTON, FL 34210	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TABER, BETSIE 8021 WATERVIEW BLVD BRADENTON, FL 34202	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D SANDERS, CAROL 6034 CHAPARRAL AVE SARASOTA, FL 34243	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MITCHELL, JOHN 328 SORRENTO ST., VENICE, FL 34285	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MITCHELL, PAULINE 328 SORRENTO ST VENICE, FL 34285	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MITCHELL, JOHN 328 SORRENTO ST SARASOTA, FL 34238	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OSBORNE, KAREN 6246 WILLET CT BRADENTON, FL 34202	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FYFE, ALAN 3930 WILSHIRE DR SARASOTA, FL 34238	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D MACCARTNEY, RON 2048 TIMUCUA TRAIL NOKOMIS, FL 34275	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/M PAILER, ALBERT 676 SPANISH DR N LONGBOAT KEY, FL 34228	☐ Change ☒ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. 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: Ron MacCartney Ron MacCartney 6-5-06 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					