

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18833

Entity Name: THE CALEDONIAN CLUB OF FLORIDA WEST, INC.**Current Principal Place of Business:**4570 HIDDEN RIVER ROAD
SARASOTA, FL 34240**Current Mailing Address:**P O BOX 19281
SARASOTA, FL 34276 US**FEI Number:** 59-2822003**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KRADOSKA, ROBERT ALLEN SR
8216 SIMPSON FALLS CT.
SARASOTA, FL 34243 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:** ROBERT A KRADOSKA

01/13/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name HOWARD, ROBERT
Address 4570 HIDDEN RIVER ROAD
City-State-Zip: SARASOTA FL 34240

Title D
Name IVERSEN, JANICE
Address 89 INLETS BLVD
City-State-Zip: NOKOMIS FL 34275

Title SECRETARY
Name SIVAK, VIVIENNE
Address 8206 HERITAGE GRAND PLACE
City-State-Zip: BRADENTON FL 34212

Title TREASURER
Name KRADOSKA, ROBERT AL
Address 8216 SIMPSON FALLS CT
City-State-Zip: SARASOTA FL 34243

Title VP
Name BURTNER, SHONA
Address 6092 WILSHIRE BLVD
City-State-Zip: SARASOTA FL 34238

Title DIRECTOR
Name FLINT, ALICE
Address 3323 RINGWOOD MEADOW
City-State-Zip: SARASOTA FL 34235

Title DIRECTOR
Name MACINTIRE, FRANK
Address 2375 ARUGULA DRIVE
City-State-Zip: NORTH PORT FL 34289

Title DIRECTOR
Name KEMP, DIANE
Address 4312 PRO AM AV EAST
City-State-Zip: BRADENTON FL 34203

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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: ROBERT KRADOSKA

TREASURER

01/13/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MCILRAITH, ALLAN
Address	4517 CHIMNEY CREEK DR
City-State-Zip:	SARASOTA FL 34235