#### 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18833

Entity Name: THE CALEDONIAN CLUB OF FLORIDA WEST, INC.

**FILED** Apr 02, 2018 **Secretary of State** CC7202725522

# **Current Principal Place of Business:**

2375 ARUGULA DRIVE NORTH PORT. FL 34289

## **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:

ELTONHEAD, SUSAN

KEMP, DIANE CHRISTINE 4312 PRO AM AVE. E. BRADENTON, FL 34203 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: DIANE CHRISTINE KEMP 04/02/2018

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Name

Title	PRESIDENT	Title	SECRETARY
Name	MACINTIRE, FRANK	Name	IVERSEN, JANICE
Address	2375 ARUGULA DRIVE	Address	89 INLETS BLVD
City-State-Zip:	NORTH PORT FL 34289	City-State-Zip:	NOKOMIS FL 34275

Title **TREASURER** Title DIRECTOR

Name KEMP, DIANE CHRISTINE Name MCILRAITH, ALLAN Address 4312 PRO AM AVE E Address 4517 CHIMNEY CREEK DRIVE **BRADENTON FL 34203** City-State-Zip: City-State-Zip: SARASOTA FL 34235

DIRECTOR Title VΡ Title Name FLINT, ALICE

Address 3323 RINGWOOD MEADOW 57 SUGAR MILL DRIVE Address

City-State-Zip: SARASOTA FL 34235 City-State-Zip: OSPREY FL 34229

Title DIRECTOR Title DIRECTOR

Name JOHNSON, CARYN TONN, MARGARET Name 5823 ELTON RD. Address 4452 OAK VIEW DRIVE Address City-State-Zip: VENICE FL 34293 City-State-Zip: SARASOTA FL 34232

## 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.

04/02/2018 SIGNATURE: DIANE KEMP **TREASURER** 

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name DALGARNO, BILL Name WALLACE, WILLIAM

Address 4603 INDEPENDENCE DRIVE Address 4683 WILLOW WOOD CIRCLE

City-State-Zip: BRADENTON FL 34210 City-State-Zip: SARASOTA FL 34241