2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#718197

FILED Feb 21, 2007 Secretary of State

Entity Name: ART LEAGUE OF MARCO ISLAND, INC.

Current Principal Place of Business: New Principal Place of Business: 1010 WINTERBERRY DRIVE MARCO ISLAND, FL 341455427 US **Current Mailing Address: New Mailing Address:** 1010 WINTERBERRY DRIVE MARCO ISLAND, FL 34145 US FEI Number: 59-1754367 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HILL, JOHN R 571 S. COLLIER BLVD MARCO ISLAND, FL 34145 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DOYLE, LIZ Name: Name: 61 PEACH CT. Address: Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: Title: DA () Delete Title: (X) Change () Addition MARTIN, VLRIKE Name: GANDRE, ROBERT Name: Address: 214 WATERWAY POINTE #201 Address: 3730 MONTREUX LANE #203 City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: NAPLES, FL 34114 Title: () Delete Title: () Change () Addition JOHNSON, LAVONNE Name: Name: Address: 361 POYNESIA CT Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: Title: DΡ () Delete Title: () Change () Addition Name: MORRIS, WILLIAM G Name: Address: P.O. BOX 2056 Address: City-St-Zip: MARCO ISLAND, FL 34146 City-St-Zip: Title: DS () Delete Title: DS (X) Change () Addition WAGNER, PEGGY HALASCHAK, BARNEY Name: Name: 159 COLUMBUS WAY 1036 S.COLLIER BLVD. #102 Address: Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: MARCO ISLAND, FL 34145 Title: () Delete Title: (X) Change () Addition HINMAN, BUD ELLIOTT, SANDY Name: Name: Address: 645 ROCKPORT CT Address: 360 GUMBO LIMBO LANE MARCO ISLAND, FL 34145 MARCO ISLAND, FL 34145 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LAVONNE JOHNSON DT 02/21/2007