

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732797

FILED
Mar 18, 2011
Secretary of State

Entity Name: MARCO ISLAND TAXPAYERS' ASSOCIATION, INC.

Current Principal Place of Business:

1558 HEIGHTS CT
MARCO ISLAND, FL 34145 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1263
MARCO ISLAND, FL 34146 US

New Mailing Address:

FEI Number: 59-1828783 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DUKLAUER, ROBERT
1360 QUINTARA
MARCO ISLAND, FL 34145 US

Name and Address of New Registered Agent:

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:

Title: P
Name: BILES, FAY R
Address: 1588 HEIGHTS CT
City-St-Zip: MARCO ISLAND, FL 34145

Title: D
Name: PETRICCA, AMADEO
Address: 331 REGATTA
City-St-Zip: MARCO ISLAND, FL 34145

Title: VP
Name: BROWN, BOB
Address: 473 JOY CIRCLE
City-St-Zip: MARCO ISLAND, FL 34145

Title: S
Name: MERRIT, JEAN
Address: 7143 MARCONI CT.
City-St-Zip: NAPLES, FL 34114

Title: D
Name: BERGER, LITHA
Address: 1648 WINDMILL
City-St-Zip: MARCO ISLAND, FL 34145

Title: TD
Name: GLAUB, KAREN
Address: 46 GULFPORT CT.
City-St-Zip: MARCO ISLAND, FL 34145

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: KAREN S. GLAUB

TD

03/18/2011

Electronic Signature of Signing Officer or Director

Date