2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 739145

1. Entity Name

MARCO ISLAND AREA ASSOCIATION OF REALTORS, INC.

FILED
Mar 27, 2000 8:00 am
Secretary of State
03-27-2000 90091 005 ****61.25

Principal Place of Business	Mailing Address
140 WATERWAY DRIVE MARCO ISLAND FL 34145 US	140 WATERWAY DRIVE MARCO ISLAND FL 34145-3561 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1872802 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PERCEL, GEORGE 140 WATERWAY DR MARCO ISLAND FL 34145	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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.

SIGNATURE ______________________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: SD NAME: TUDD, RITA STREET ADDRESS: 599 S COLLIER BLVD SUITE 214 CITY-ST-ZIP: MARCO ISLAND FL	☒ Delete	TITLE: SD NAME: MCGREGOR, JAMES STREET ADDRESS: 291 S COLLIER BLVD CITY-ST-ZIP: MARCO ISLAND FL 34145	☐ Change ☒ Addition
TITLE: VP NAME: PERCEL, GEORGE STREET ADDRESS: 140 WATERWAY DR CITY-ST-ZIP: MARCO ISLAND FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE: VD NAME: COMPTON, BARBARA STREET ADDRESS: 599 S COLLIER BLVD SUITE 214 CITY-ST-ZIP: MARCO ISLAND FL	☒ Delete	TITLE: VD NAME: PUSZ, ANNA STREET ADDRESS: 900 N COLLIER BLVD CITY-ST-ZIP: MARCO ISLAND FL 34145	☐ Change ☒ Addition
TITLE: PD NAME: KELLERHOUSE, PRISCILLA STREET ADDRESS: 928 N COLLIER BLVD CITY-ST-ZIP: MARCO ISLAND FL	☒ Delete	TITLE: PD NAME: SHANAHAN, RICHARD STREET ADDRESS: 900 N COLLIER BLVD CITY-ST-ZIP: MARCO ISLAND FL 34145	☐ Change ☒ Addition
TITLE: TD NAME: DAILEY, MAURICE STREET ADDRESS: 599 S. COLLIER BLVD., #214 CITY-ST-ZIP: MARCO ISLAND FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/99)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I 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: RECEIVED George A. Percel 3/17/00 (941) 394-5616
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #