

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005875

FILED  
Apr 13, 2012  
Secretary of State

**Entity Name:** MARCO ISLAND HISTORICAL SOCIETY, INC.

**Current Principal Place of Business:**

MARCO ISLAND MUSEUM  
180 S. HEATHWOOD DRIVE  
MARCO ISLAND, FL 34145 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2282  
MARCO ISLAND, FL 34146 US

**New Mailing Address:**

FEI Number: 59-3425001

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WOODWARD, CRAIG R  
606 BALD EAGLE DRIVE  
SUITE 500  
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: D/P  
Name: MIRACCO, KATHY  
Address: 1142 BREAKWATER COURT  
City-St-Zip: MARCO ISLAND, FL 34145

Title: D/VP  
Name: WAGOR, TOM L  
Address: 1414 JAMICA ROAD  
City-St-Zip: MARCO ISLAND, FL 34145

Title: T/D  
Name: WOOD, CAROL  
Address: 1070 S. COLLIER BLVD, UNIT 306  
City-St-Zip: MARCO ISLAND, FL 34145

Title: D/S  
Name: HENDERSON, DOTTIE  
Address: 686 THRUSH COURT  
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: CRAIG WOODWARD

RA

04/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date