

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2006 8:00 am
Secretary of State

03-07-2006 90013 031 ****61.25

DOCUMENT # N31905

1. Entity Name
MARCO SPORTFISHING CLUB, INC.



Principal Place of Business
**PO BOX 2104
MARCO ISLAND, FL 34146-104 US**

Mailing Address
**PO BOX 2104
MARCO ISLAND, FL 34146-104 US**

50001144



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01212006 Chg-NP CR2E037 (11/05)

4. FEI Number
65-0276781

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

**GREUSEL, JAMIE B.
1104 N. COLLIER BLVD
MARCO ISLAND, FL 33937**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$81.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME RUMPH, JAMES
STREET ADDRESS 468 PEPPERWOOD COURT
CITY-ST-ZIP MARCO ISLAND, FL 34145

TITLE P ☐ Change ☒ Addition
NAME PRESIDENT
STREET ADDRESS PETER ARCDIAONO
1243 TREASURE CT.
CITY-ST-ZIP MARCO ISLAND FL 34145

TITLE VPD ☒ Delete
NAME VESELY, EDMOND
STREET ADDRESS 35 GULFPORT COURT
CITY-ST-ZIP NAPLES, FL 34114

TITLE S ☐ Change ☒ Addition
NAME VP/SECRETARY
STREET ADDRESS JOE DOGGETT
1264 WHITEHEART AVE
CITY-ST-ZIP MARCO ISLAND FL 34145

TITLE D ☒ Delete
NAME RAYMOND, DZIEJMA
STREET ADDRESS 1020 SWALLOW AVENUE
CITY-ST-ZIP MARCO ISLAND, FL 34145

TITLE T ☐ Change ☒ Addition
NAME VP TREASURER
STREET ADDRESS ED CRANE
357 CAPISTRANO CT.
CITY-ST-ZIP MARCO ISLAND FL 34145

TITLE VDS ☒ Delete
NAME GOTTFRIED, PETER
STREET ADDRESS 256 ROCKHILL CT.
CITY-ST-ZIP MARCO ISLAND, FL 34145

TITLE D ☐ Change ☒ Addition
NAME VP
STREET ADDRESS ED BROWN
1137 BREAKWATER CT.
CITY-ST-ZIP MARCO ISLAND FL 34145

TITLE D ☒ Delete
NAME CAVANAGH, JOHN
STREET ADDRESS 228 BASS COURT
CITY-ST-ZIP MARCO ISLAND, FL 34145

TITLE D ☐ Change ☒ Addition
NAME EDITOR
STREET ADDRESS ART SEGAL
276 NAPA RIDGE EAST
CITY-ST-ZIP NAPLES FL 34119

TITLE D ☒ Delete
NAME ARCDIAONO, PETER
STREET ADDRESS 1243 TREASURE COURT
CITY-ST-ZIP MARCO ISLAND, FL 34145

TITLE D ☐ Change ☒ Addition
NAME PUBLIC RELATIONS
STREET ADDRESS MIKE LEVINE
331 CAPISTRANO CT.
CITY-ST-ZIP MARCO ISLAND FL 34145

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

[Signature]

F.E. CRANE

3/3/06

239-393-0415

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #