

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718197

Entity Name: ART LEAGUE OF MARCO ISLAND, INC.**Current Principal Place of Business:**1010 WINTERBERRY DRIVE
MARCO ISLAND, FL 34145-5427**Current Mailing Address:**1010 WINTERBERRY DRIVE
MARCO ISLAND, FL 34145-5427 US**FEI Number:** 59-1754367**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HILL, JOHN R
606 BALD EAGLE DRIVE STE 400
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

Officer/Director Detail :

Title DIRECTOR
Name PALOMBO, MARY PAT
Address 1771 LUDLOW ROAD
City-State-Zip: MARCO ISLAND FL 34145

Title DIRECTOR
Name ROBERTSON, BRUCE
Address 672 KENDALL DR.
City-State-Zip: MARCO ISLAND FL 34145

Title CHAIRMAN
Name RHEINER, WILLIAM
Address 1060 BORGHESE LANE
UNIT 1004
City-State-Zip: NAPLES FL 34114

Title DIRECTOR
Name ZEMEL, MARY
Address 970 CAPE MARCO DR. #805
City-State-Zip: MARCO ISLAND FL 34145

Title DIRECTOR
Name DARROW, SUE
Address 889 HEATHWOOD DR.
City-State-Zip: MARCO ISLAND FL 34145

Title TREASURER
Name JAMES, JOHN
Address 960 CAPE MARCO DR.
UNIT 606
City-State-Zip: MARCO ISLAND FL 34145

Title DIRECTOR
Name STROUD, KENNETH
Address 165 GERANIUM CT.
City-State-Zip: MARCO ISLAND FL 34145

Title VP
Name RODDY, DEBBIE
Address 1860 WATSON RD.
City-State-Zip: MARCO ISLAND FL 34145

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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: JOHN JAMES**TREASURER****04/20/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT
Name RICHARDS, JIM
Address 1884 CASCADE CT.
City-State-Zip: MARCO ISLAND FL 34145

Title DIRECTOR
Name PORTER, KIMBERLY
Address 189 MAJORCA CIRCLE
City-State-Zip: MARCO ISLAND FL 34145

Title DIRECTOR
Name POLK, MICHELENE
Address 5000 ROYAL MARCO WAY
 UNIT 736
City-State-Zip: MARCO ISLAND FL 34145

Title SECRETARY
Name KING, CHARLANE
Address 8352 LUCELLO TERR. N.
City-State-Zip: NAPLES FL 34114

Title DIRECTOR
Name DOUGHERTY, JOHN
Address 720 N. COLLIER BLVD.
 UNIT 204
City-State-Zip: MARCO ISLAND FL 34145