

**2013 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:** No**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            PRESIDENT  
Name            WICK, ROSEMARY  
Address        960 CAPE MARCO DR.  
                  #1606  
City-State-Zip: MARCO ISLAND FL 34145

Title            VP  
Name            CARUSO, DAVID  
Address        1131 ABBEVILLE COURT  
City-State-Zip: MARCO ISLAND FL 34145

Title            DIRECTOR  
Name            GROVER, VIP  
Address        339 LANDMARK ST.  
City-State-Zip: MARCO ISLAND FL 34145

Title            DIRECTOR  
Name            BARON, MARY  
Address        4000 ROYAL MARCO WAY  
                  #828  
City-State-Zip: MARCO ISLAND FL 34145

Title            TREASURER  
Name            DOUGHERTY, JOHN  
Address        560 S. COLLIER BLVD  
City-State-Zip: MARCO ISLAND FL 34145

Title            DIRECTOR  
Name            FORCHT, THEODORE  
Address        206 STILLWATER COURT  
City-State-Zip: MARCO ISLAND FL 34145

Title            DIRECTOR  
Name            INESON, HANNAH  
Address        7382 EMILIA LANE  
City-State-Zip: NAPLES FL 34114

Title            DIRECTOR  
Name            GRAEV, BRUCE  
Address        467 NASSAU CT.  
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:** ROSEMARY WICK**PRESIDENT****04/29/2013**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name PETROPOULOS, ARIS  
Address 960 CAPE MARCO DR.  
#1901  
City-State-Zip: MARCO ISLAND FL 34145

Title SECRETARY  
Name WILLIAMS, SALLIE  
Address 1857 SAN MARCO RD.  
SUITE #214  
City-State-Zip: MARCO ISLAND FL 34145

Title DIRECTOR  
Name PIERCE, JACQUELYN  
Address 174 S. COLLIER BLVD.  
#705  
City-State-Zip: MARCO ISLAND FL 34145

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