2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700584

FILED Jan 09, 2007 Secretary of State

Entity Name: ANNA MARIA ISLAND COMMUNITY CENTER, INC.

Current Principal Place of Business: New Principal Place of Business:

407 MAGNOLIA AVENUE 407 MAGNOLIA AVENUE PO BOX 253 ANNA MARIA, FL 342160253

ANNA MARIA, FL 342160253

Current Mailing Address: New Mailing Address:

P.O. BOX 253
ANNA MARIA, FL 34216
407 MAGNOLIA AVENUE
PO BOX 253
ANNA MARIA, FL 34216
ANNA MARIA, FL 34216

FEI Number: 59-6166231 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PRICE, KENNETH A JR
219 85TH ST
BREITER, THOMAS
316 TARPON

HOLMES BEACH, FL 34217 US ANNA MARIA, FL 34216 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: THOMAS BREITER 01/09/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD () Delete Title: CD (X) Change () Addition

 Name:
 PRICE, KENNETH A JR
 Name:
 BREITER, THOMAS

 Address:
 219 85TH ST
 Address:
 316 TARPON

 City-St-Zip:
 HOLMES BEACH, FL 34217
 City-St-Zip:
 ANNA MARIA, FL 34216

Title: VCD () Delete Title: VCD (X) Change () Addition

Name: BOBO, J. ALLÉN Name: RUDACILLE, SCOTT Address: 630 EMERALD LANE Address: 222 85TH ST.

City-St-Zip: HOLMES BCH., FL 34217 US City-St-Zip: HOLMES BCH., FL 34217 US

Title: DT () Delete Title: DT (X) Change () Addition Name: BREITER, TOM Name: FORD, WILLIAM

 Address:
 316 TARPON ST
 Address:
 7000 GULF DRIVE #105

 City-St-Zip:
 ANNA MARIA, FL 34216
 City-St-Zip:
 HOLMES BEACH, FL 34217

Title: DS () Delete Title: DS (X) Change () Addition

 Name:
 HORNA, JOHN
 Name:
 HORNA, JOHN

 Address:
 8403 MARINA DRIVE
 Address:
 8717 17TH AVE. NW

 City-St-Zip:
 ANNA MARIA, FL 34216
 City-St-Zip:
 BRADENTON, FL 34209

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: PIERRETTE KELLY ED 01/09/2007