2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2012
Secretary of State

DOCUMENT# 700584

Entity Name: ANNA MARIA ISLAND COMMUNITY CENTER, INC.

Current Principal Place of Business:

407 MAGNOLIA AVENUE
ANNA MARIA, FL 342160253

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 253
ANNA MARIA, FL 34216

New Mailing Address:

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

Name and Address of Current Registered Agent:

KELLY, PIERRETTE
8407 MARINA DRIVE
HOLMES BEACH, FL 34217 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: CD
Name: ROSS, GREGORY
Address: 526 74TH STREET
City-St-Zip: HOLMES BEACH, FL 34217

Title: VCD
Name: RUDACILLE, SCOTT
Address: 222 85TH ST.
City-St-Zip: HOLMES BCH., FL 34217 US

Title: DT
Name: LANGLEY, RANDY
Address: 6000 GULF OF MEXICO DRIVE
City-St-Zip: LONGBOAT KEY, FL 34228

Title: DS
Name: SIMPSON, MONICA
Address: 7514 AVE. DR. W.
City-St-Zip: BRADENTON, FL 34209

Title: D
Name: GIDUS, ANDREW
Address: 607 CONCORD LANE
City-St-Zip: HOLMES BEACH, FL 34217

Title: D
Name: JOSEPH, KELLY
Address: 520 69TH STREET
City-St-Zip: HOLMES BEACH, FL 34217

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: PIERRETTE KELLY ED 02/15/2012

Electronic Signature of Signing Officer or Director — Date