

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2008 8:00 am
Secretary of State

02-08-2008 90034 036 ****61.25

DOCUMENT # 710443

1. Entity Name
PORT MARCO ASSOCIATION, INC.



Principal Place of Business
**1219 BALD EAGLE DR.
 MARCO ISLAND, FL 34145**

Mailing Address
**1219 BALD EAGLE DR.
 MARCO ISLAND, FL 34145**

40020983



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

01312008 Chg-NP CR2E037 (12/06)

City & State
 Zip Country

4. FEI Number
59-1651656

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**NAPLES-LAWDOCK, INC.
 1395 PANTHER LANE, SUITE 300
 NAPLES, FL 34109**

7. Name and Address of New Registered Agent
 Name **DENNIS H. SCHMITT**
 Street Address (P.O. Box Number is Not Acceptable)
1219 BALD EAGLE DR.
 City **MARCO ISLAND FL** Zip Code **34145**

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 **DENNIS H. SCHMITT, PRESIDENT** *Dennis H. Schmitt, PRESIDENT* **2-1-08**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
 Due by May 1, 2008

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

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
PD	SCHMITT, DENNIS	1219 BALD EAGLE DR	MARCO ISLAND, FL 34145	<input type="checkbox"/>
VD	WETZEL, WILLIAM D	1219 BALD EAGLE DRIVE	MARCO ISLAND, FL 34145	<input type="checkbox"/>
TD	BOWER, KATHRYN	1219 BALD EAGLE DR	MARCO ISLAND, FL 34145	<input checked="" type="checkbox"/>
SD	WETZEL, MAUREEN	1219 BALD EAGLE DR	MARCO ISLAND, FL 34145	<input type="checkbox"/>
D	PAYNE, JAMES W.	1219 BALD EAGLE DR	MARCO ISLAND, FL 34145	<input type="checkbox"/>
D	VANN, HAROLD	1219 BALD EAGLE DR	MARCO ISLAND, FL 34145	<input checked="" type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TD	BAUER, KATHRYN	1219 BALD EAGLE DR	MARCO ISLAND, FL 34145	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	WISE, ROGER	1219 BALD EAGLE DR.	MARCO ISLAND, FL 34145	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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: **Kathryn A. Bauer, Treas.** *Kathryn A. Bauer, Treas.* **2-1-08** **239-389-0130**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #