



# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 28, 2005 8:00 am**  
**Secretary of State**

03-28-2005 90061 020 \*\*\*\*61.25

<b>DOCUMENT # 714886</b> 1. Entity Name <b>THE UNITED CHURCH OF MARCO ISLAND, INC.</b>					
Principal Place of Business <b>320 N BARFIELD DR MARCO ISLAND, FL 34145</b>				Mailing Address <b>320 N BARFIELD DR MARCO ISLAND, FL 34145</b>	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02092005 Chg-NP CR2E037 (10/03)	
City & State		City & State		4. FEI Number <b>59-1861678</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>WHEELER, WARREN G JR. 6000 ROYAL MARCO WAY, #657 MARCO ISLAND, FL 34145</b>				Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$61.25 Due by May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD GANDRE, BOB 340 CAPISTRANO COURT MARCO ISLAND, FL 34146</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD Van Meter, Ronald 8541 Pepper Tree Way Naples, FL 34114</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPD WEISS, DANIEL 1100 S. COLLIER BLVD. #1824 MARCO ISLAND, FL 34145</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPD Yates, David 7450 Mulberry Lane Naples, FL 34114</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD WHEELER, WARREN JR. 6000 ROYAL MARCO WAY, #657 MARCO ISLAND, FL 34145</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S O'NEILL, JEAN 1100 N SUNSET STREET MARCO ISLAND, FL 34145</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S Van Meter, Millie 8541 Pepper Tree Way Naples, FL 34114</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>FS HISTAND, DALE 1655 BRAIRWOOD CT MARCO ISLAND, FL 34145</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>FS Gaffney, Bob 132 Shorecrest Court Marco Island, FL 34145</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.					
<b>SIGNATURE:</b> <i>Warren G. Wheeler Jr.</i> <b>WARREN G. WHEELER JR. TREAS 3/23/05 239-394-6572</b>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					