

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2006 8:00 am
Secretary of State

02-09-2006 90041 013 ****61.25

DOCUMENT # 718857

1. Entity Name
THE AQUARIUS APARTMENTS OF MARCO ISLAND, INC.



Principal Place of Business
**MARCO ISLAND INC
167 N COLLIER BLVD
MARCO ISLAND, FL 33937**

Mailing Address
**MARCO ISLAND INC
167 N COLLIER BLVD
MARCO ISLAND, FL 33937**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02032006

Chg-NP

CR2E037 (11/05)

4. FEI Number
59-1372658

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GREUSEL, JAMIE
1104 N COLLIER BLVD.
MARCO ISLAND, FL 34145**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

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, 2006

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
**VD
HOLLENBECK, DOROTHY
167 N COLLIER BLVD.
MARCO ISLAND, FL 34145** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MAS
WHITE, WILLIAM D
2310 DELLA DR
NAPLES, FL 34117** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
BREEN, VINCENT
167 N COLLIER BLVD.
MARCO ISLAND, FL 34145** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**STD
CORMIER, NANCY
167 N. COLLIER J5
MARCO ISLAND, FL 34145** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVP
SMITH, GEORGE
1505 WESTSHIRE
MARTINSVILLE, IN 46151** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**John D. Gibson
9791 S.W. 132ND TERRACE
MIAMI, FL 33176** ☒ Change ☐ Addition
(1ST V.P.)

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**William White, Prop. Mgr.
2310 DELLA DR.
NAPLES, FL 34117** ☐ Change ☐ Addition
SAME
(SECRETARY)

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**LAURENE SZKATULSKI
1534 SUNSET RIDGE Rd.,
GLENVIEW, IL 60025** ☒ Change ☐ Addition
(PRES.)

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Kenneth Rydberg
10 Edgewood Rd.,
VERNON HILLS, IL 60061** ☒ Change ☐ Addition
(TREASURER)

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Anthony Napoli
8 PULLMAN DR.
HOLLIS, NH 03049** ☒ Change ☐ Addition
(2ND V.P.)

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: *Anthony Napoli 2nd Vice President*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/06

(239) 394-7141

Date

Daytime Phone #