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Apr 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 742147 (2)
 1. Corporation Name
ROTARY CLUB OF MARCO ISLAND, INC.

Principal Place of Business 801 E. ELKCAM CIR A-1-A MARCO ISLAND FL 34145 US	Mailing Address PO BOX 1488 MARCO ISLAND FL 34146 US
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3. Date Incorporated or Qualified
03/21/1978

4. FEI Number
59-6177443

Applied For	
Not Applicable	

21 2. Principal Place of Business Suite, Apt. #, etc.	26 2a. Mailing Address Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

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

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
 Yes No

9. Name and Address of Current Registered Agent
**CHARDE, JOHN J. C
 601 E. ELKCAM CIRCLE
 P.O. BOX 1488
 MARCO ISLAND FL 33969**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	SCHROLL, GEORGE J.	
STREET ADDRESS	829 BLUEBONNET CT	
CITY-ST-ZIP	MARCO ISLAND FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	GLENN, WILLIAMS	
STREET ADDRESS	1270 STONE CT	
CITY-ST-ZIP	MARCO ISLAND FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	PETREY, KENNETH	
STREET ADDRESS	198 BALTUROL DR	
CITY-ST-ZIP	NAPLES FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	LYON, ROBERT L.	
STREET ADDRESS	1090 S COLLIER BLVD, #619	
CITY-ST-ZIP	MARCO ISLAND FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	JOHN J CHARDE	
STREET ADDRESS	801 MILAN CT	
CITY-ST-ZIP	MARCO ISLAND FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KNAVERHASE, GEROLD	
STREET ADDRESS	175 SOCIETY COURT	
CITY-ST-ZIP	MARCO ISLAND FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	133 VINTAGE BAY DR #2
5.4 CITY-ST-ZIP	MARCO ISLAND FL 34145
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: *[Signature]* **JOHN J. CHARDE** 4/17/98 941-642-9292

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