

**FILED**  
**Mar 11, 1999 8:00 am**  
**Secretary of State**

03-11-1999 90239 002 \*\*\*\*61.25

NONPROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 742147**  
 1. Corporation Name  
**ROTARY CLUB OF MARCO ISLAND, INC.**

Principal Place of Business 601 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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2. Principal Place of Business 21 615 Elkcam Circle E Suite, Apt. #, etc.	2a. Mailing Address 26 P. O. Box 353 Suite, Apt. #, etc.	3. Date Incorporated or Qualified 03/21/1978
22 City & State 23 Marco Island, FL Zip 34145 Country USA	27 City & State 28 Marco Island, FL Zip 34146 Country USA	4. FEI Number 59-6177443 Applied For Not Applicable
9. Name and Address of Current Registered Agent CHARDE, JOHN J. C. 601 E. ELKCAM CIRCLE P.O. BOX 1488 MARCO ISLAND FL 33969		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

10. Name and Address of New Registered Agent 81 Name Eugene O. Jenkins, Jr. 82 Street Address (P.O. Box Number is Not Acceptable) 615 Elkcam Circle E. 83 84 City Marco Island FL 85 Zip Code 34145	
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. Eugene O. Jenkins, Jr., Treasurer 04/06/99 SIGNATURE: <i>Eugene O. Jenkins, Jr.</i> (NOTE: Registered Agent signature required when re-registering) DATE	

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHROLL, GEORGE J. 829 BLUEBONNET CT MARCO ISLAND FL <input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	P Michael Minozzi 250 Fiji Court Marco Island, FL 34145 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GLENN, WILLIAMS 1270 STONE CT MARCO ISLAND FL <input checked="" type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	V John C. Scott 533 Tigertail Court Marco Island, FL 34145 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PETREY, KENNETH 196 BALTUROL DR NAPLES FL <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LYON, ROBERT L. 1090 S COLLIER BLVD, #619 MARCO ISLAND FL <input checked="" type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	S Al Diaz 720 S. Collier Blvd. Marco Island, FL 34145 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JOHN J CHARDE 133 VINTAGE BAY DRIVE #2 MARCO ISLAND FL 34145 <input checked="" type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	T Eugene O. Jenkins 615 Elkcam Circle E. Marco Island, FL 34145 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KNAVERHASE, GEROLD 175 SOCIETY COURT MARCO ISLAND FL <input checked="" type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	D George Majdalani 1952 Sheffield Avenue Marco Island, FL 34145 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 03/10/99 (941) 642-7111  
 Eugene O. Jenkins, Treasurer

CR2E037 (1/98)