2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755529

Entity Name: CASA DE MARCO, INC.

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace of Dusiliess.

950 N COLLIER BLVD 950 N COLLIER BLVD

420 415

MARCO ISLAND, FL 34145 US MARCO ISLAND, FL 34145 US

Current Mailing Address: New Mailing Address:

POB 1813

MARCO ISLAND, FL 34146 US

FEI Number: 59-2261395 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NEW BEGINNINGS NEW BEGINNINGS

450 N COLLIER BLVD STE 420 450 N COLLIER BLVD STE 415 MARCO ISLAND, FL 34145 US MARCO ISLAND, FL 34145 US

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.

SIGNATURE: TAMMY BENNETTS 04/20/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: PIERRE, DONALD ST Name: GAGLIARDI, RICHARD

Address: 1041 S. COLLIER BLVD Address: 401 SANDPIPER CT.
City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: BRICK, NJ 08723

Title: DTS () Delete Title: VP (X) Change () Addition

Name: DEPALMA, JANIS Name: DEPALMA, JANIS

 Address:
 1041 S COLLIER BLVD
 Address:
 1041 S COLLIER BLVD, #306

 City-St-Zip:
 MARCO ISLAND, FL 34145
 City-St-Zip:
 MARCO ISLAND, FL 34145

Title: D () Delete Title: () Change () Addition

 Name:
 SMITH, JUDY
 Name:

 Address:
 2545 SUNNY WOOD CT
 Address:

 City-St-Zip:
 BEAVERCREEK, OH 45434
 City-St-Zip:

Title: () Delete Title: ST () Change (X) Addition

Name: Name: HAUGE, JOANN

Address: Address: 1041 S. COLLIER BLVD, , 204
City-St-Zip: City-St-Zip: MARCO ISLAND, FL 34145

Name: SCHMELZER, WANDA Address: 1041 S. COLLIER BLVD, 401
City-St-Zip: City-St-Zip: MARCO ISLAND, FL 34145

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 ST. PIERRE, DONALD

 Address:
 Address:
 354 COOK LANE

 City-St-Zip:
 City-St-Zip:
 MARLBORO, MA 01752

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD GAGLIARDI P 04/20/2009