## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 05, 2006 8:00 am Secretary of State

04-05-2006 90135 008 \*\*\*\*61.25

## DOCUMENT # 759911

1. Entity Name
MARCO ISLAND CEMETERY, INC



MARCO	SLAND CEMETERY, INC.						
Principal Place of Business 489 W. ELKCAM CRCLE MARCO ISLAND, FL 34145 US		Mailing Address P.O. BOX 23 MARCO ISLAND, FL 34146		1 (1)	4011 1811 1812 FEB CE	em em em <b>e</b> m em em em	10 H.CH
2. Principal Pla	ace of Business	3. Mailing Address					
Suite, Apt. #. etc.		Suite, Apt. #, etc.		03152006	O. 110	ODOF007 (1410E)	
Suite, Apt. 1	r, etc.	Belle, Apr. 1, etc.			Chg-NP	CR2E037 (11/05)	plied For
City & State		City & State		4. FEI Numbe 59-222	59-2222856 Not Ap		
Zip	Country	Zip	Country	5. Certificate	of Status Desired	S8.75 Add Fee Require	
	6. Name and Address of Current	Registered Agent		7. Name and	Address of New R	egistered Agent	
		•	Name				
ZUMBRUN, PHOEBE V. 465 BALD EAGLE			Street Ad	ldress (P.O. Box Numbe	r is Not Acceptable	e)	
#1 MARCO IS	LAND, FL 34145						
			City			FL Zip Coo	e
8. The above	named entity submits this statement f	or the purpose of changing its re	egistered office or	registered agent, or bot	h, in the State of Fk	orida. I am familiar with	and accept
the obligati	ions of registered agent.						
0101147117							
SIGNATURE .	Signature, typed or printed name of registered ages	at and tide if applicable. (NOTE:	Registered Agent signsta	re required when reinstating)		DATE:	
SIGNATURE .	Signature, typed or printed name of registered ages Filling Fee is \$61.25 Due by May 1, 2006	9. Election Carry Trust Fund Co	paign Financing	\$5.00 May B Added to Fees	Flor	lake check payable rida Department of S	tate
SIGNATURE -	Filing Fee is \$61.25	9. Election Cam Trust Fund Co	paign Financing ontribution.	\$5.00 May B Added to Fees ADDITIONS/CH	Flor	lake check payable ride Department of S	tate
10.	Filing Fee is \$61.25 Due by May 1, 2006  OFFICERS AND D	9. Election Cam Trust Fund Co	paign Financing ontribution.	\$5.00 May B Added to Fees ADDITIONS/CH	Flor	lake check payable ride Department of S	tate
10. TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2006  OFFICERS AND D  PD  ROBERTSON, AARON	9. Election Cam Trust Fund Co	paign Financing ontribution.	\$5.00 May B Added to Fees ADDITIONS/CH	Flor	lake check payable ride Department of S	tate
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10. TITLE MANE STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006  OFFICERS AND D  PD  ROBERTSON, AARON  165 LELAND WAY	9. Election Cam Trust Fund Co	paign Financing ontribution.  11.  TIFLE NAME STREET ADDRESS	\$5.00 May B Added to Fees	Flor	lake check payable ride Department of S	tate
10. TITLE MAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2006  OFFICERS AND D  PD  ROBERTSON, AARON  165 LELAND WAY  MARCO ISLAND, FL 34145  D  EVANSON, MILTON L	9. Election Came Trust Fund Co	paign Financing ontribution.  11.  TIFLE NAME STREET ADDRESS CITY-ST-ZIP  TIFLE NAME	\$5.00 May B Added to Fees ADDITIONS/CH	Flor	lake check payable ride Department of SERS AND DIRECTORS II	N 10 Addition
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10. TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006  OFFICERS AND D  PD ROBERTSON, AARON 165 LELAND WAY MARCO ISLAND, FL 34145  D EVANSON, MILTON L 1958 SHEFFIELD MARCO ISLAND, FL 34145  D3 BOWEN, LESTER 700 INLET DR MARCO ISLD, FL 34145  TM	9. Election Camp Trust Fund Co	paign Financing ontribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE TM	\$5.00 May B Added to Fees  ADDITIONS/CH  PRESIDENT  KEUIN L. GA 21437 SHERI ESTERO, F	ANGES TO OFFICE  CISSOM ON RUN FL 339	Aske check payable rida Department of SERS AND DIRECTORS II  Change  Change  Change	N 10 Addition
10.  TITLE  MAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  MAME	Filing Fee is \$61.25 Due by May 1, 2006  OFFICERS AND D  PD ROBERTSON, AARON 165 LELAND WAY MARCO ISLAND, FL 34145  D EVANSON, MILTON L 1958 SHEFFIELD MARCO ISLAND, FL 34145  D3 BOWEN, LESTER 700 INLET DR MARCO ISLD, FL 34145  TM ZUMBRUN, PHOEBE V.	9. Election Camparate Fund Contract Fund Fund Fund Fund Fund Fund Fund Fund	paign Financing ontribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME NAME NAME NAME NAME	\$5.00 May Be Added to Fees ADDITIONS/CH PRESIDENT KEUIN L. GA 21437 SHERO, F	ANGES TO OFFICE  CISSOM  DAN RUN  FL 339.	Aske check payable rida Department of SERS AND DIRECTORS II  Change  Change  Change	N 10 Addition Addition
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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:

SIGNATURE AND TYPED OR PRINTED RANGE OF SIGNANG OFFICER OR DIRECTOR

239-394-3469