

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762962

FILED
Jan 07, 2012
Secretary of State

Entity Name: MARCO SHORES ESTATES COMMUNITY CLUB, INC.

Current Principal Place of Business:

MARCO SHORES ESTATES, 1500 MANATEE RD.
NAPLES, FL 34114

New Principal Place of Business:

Current Mailing Address:

C/O NANCY WEST
140 CABBAGE PALM LANE
NAPLES, FL 34114

New Mailing Address:

FEI Number: 59-2402131 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WEST, NANCY C S
140 CABBAGE PALM LANE
NAPLES, FL 34114 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P
Name: SAUER, JIM
Address: 88 NORFOLK PINE LANE
City-St-Zip: NAPLES, FL 34114

Title: VP
Name: SCHUBERT, PHIL
Address: 49 QUEEN PALM
City-St-Zip: NAPLES, FL 34114

Title: S
Name: WEST, NANCY
Address: 140 CABBAGE PALM LANE
City-St-Zip: NAPLES, FL 34114

Title: T
Name: CONRAD, LIBBY
Address: 87 NORFOLK PINE LANE
City-St-Zip: NAPLES, FL 34114

Title: D
Name: BOHLER, DON
Address: 92 NORFOLK PINE LANE
City-St-Zip: NAPLES, FL 34114

Title: D2
Name: MIDDLEBROOK, SYLVIA
Address: 219 ROBELINA PALM LANE
City-St-Zip: NAPLES, FL 34114

I hereby 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 all other like empowered.

SIGNATURE: NANCY C. WEST

SECR

01/07/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date