∠007 NOT-FOR-PROFIT CORPORATIONANNUAL REPORT

DOCUMENT # N03000007503

1. Entity Name

MARCO ISLAND MODEL YACHT CLUB INC



Principal Place of Business

907 PANAMA CT

UNIT 401

MARCO ISLAND, FL 34145

Mailing Address

907 PANAMA CT

UNIT 401

MARCO ISLAND, FL 34145

FILED Apr 09, 2007 8:00 am Secretary of State

04-09-2007 90044 021 ****61.25



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03302007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 20-0160514

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

DOMENECH, GEORGE 907 PANAMA CT UNIT 401 MARCO ISLAND, FL 34145

DO NOT WRITE
D. FL 34145
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE Signature. Ayend or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when revisibility) DATE						
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Financir Trust Fund Contribution.	,a \Box	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DOMENECH, GEORGE 907 PANAMA CT UNIT 401 MARCO ISLAND, FL 34145					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SOUMATABLEA THOMAS MARCOISLAND FL 24145					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST KARTER, JAMES 540 S HEATHWOOD DR MARCO ISLAND, FL 34145			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V NIC NICOLSON 1891 CALUSSA St. MARCO ISLAND, FL	34145	in this space			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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 eath; 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.						