

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004121

FILED
Jan 08, 2008
Secretary of State

Entity Name: MARCO ISLAND COMMUNITY FOUNDATION, INC.

Current Principal Place of Business:

1083 N COLLIER BLVD
#198
MARCO ISLAND, FL 341452539

New Principal Place of Business:

Current Mailing Address:

1083 N COLLIER BLVD
#198
MARCO ISLAND, FL 341452539

New Mailing Address:

FEI Number: 13-4321393 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREEMAN, RICHARD F
1083 N COLLIER BLVD
#198
MARCO ISLAND, FL 341452539 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: CT () Delete
Name: FREEMAN, RICHARD F
Address: 812 HIDEAWAY CIRCLE EAST #124
City-St-Zip: MARCO ISLAND, FL 34145

Title: VCT () Delete
Name: WILSON, JAMES M.D.
Address: 5000 ROYAL MARCO WAY #630
City-St-Zip: MARCO ISLAND, FL 34145

Title: VCT () Delete
Name: BRECHNITZ, ERIK
Address: 2000 ROYAL MARCO WAY #401
City-St-Zip: MARCO ISLAND, FL 34145

Title: ST () Delete
Name: MAGEL, LARRY
Address: 2000 ROYAL MARCO WAY #PH-C
City-St-Zip: MARCO ISLAND, FL 34145

Title: TT () Delete
Name: BUCHANAN, JOHN
Address: 2000 ROYAL MARCO WAY #306
City-St-Zip: MARCO ISLAND, FL 34145

Title: T () Delete
Name: FREEMAN, BARBARA J
Address: 812 HIDEAWAY CIRCLE EAST #124
City-St-Zip: MARCO ISLAND, FL 34145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 F. FREEMAN

PRES

01/08/2008

Electronic Signature of Signing Officer or Director

Date