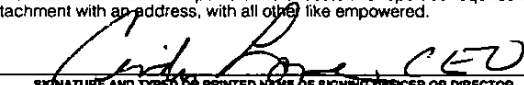


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90150 032 ****61.25

DOCUMENT # N07168 1. Entity Name THE MARCO ISLAND Y.M.C.A., INC.					
Principal Place of Business 101 SANDHILL ST MARCO ISLAND, FL 34145 US			Mailing Address P.O. BOX 2529 MARCO ISLAND, FL 34146		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2498619	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LOVE, LUCINDA K 101 SANDHILL ST MARCO, FL 33937				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CURRAN, JAMES 590 CLUB MAREO CT #201 MARCO ISLAND, FL 34145	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M LOVE, CINDY 47 TAHITI RD. MARCO ISLAND, FL 34145	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KRAUERHASE, GERRY 1106 DORCHESTER CT NAPLES, FL 34104	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Melvin Allman P.O. Box 2056 Marco Island, FL 34146	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STAKICH, BOB 1001 BARFIELD DR MARCO ISLAND, FL 34145	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Ashley Lupo 478 Echo Circle Marco Island, FL 34145	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WETJEN, ALAN 1690 RAINBOW COURT MARCO ISLAND, FL 34145	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Alan Wetjen 5729 Lago Villaggio Way Naples, FL 34104	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Elect Paula Robinson P.O. Box 976 Marco Island, FL 34146	☐ Change ☒ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 			Date 4/8/05 Daytime Phone #		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					