# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 20, 2009**
**Secretary of State**

DOCUMENT# N07168

**Entity Name:** THE MARCO ISLAND Y.M.C.A., INC.

**Current Principal Place of Business:**

101 SANDHILL ST
MARCO ISLAND, FL 34145 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2529
MARCO ISLAND, FL 34146

**New Mailing Address:**

**FEI Number: 59-2498619** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LOVE, LUCINDA K
101 SANDHILL ST
MARCO, FL 33937 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: VD ( ) Delete
Name: HAUSAUER, JOE
Address: 567 GOLDCOAST COURT
City-St-Zip: MARCO ISLAND, FL 34145

Title: M ( ) Delete
Name: LOVE, CINDY
Address: 47 TAHITI RD.
City-St-Zip: MARCO ISLAND, FL 34145

Title: TD ( ) Delete
Name: KNAUERHASE, GEROLD
Address: 463 ECHO CIRCLE
City-St-Zip: MARCO ISLAND, FL 34145

Title: S ( ) Delete
Name: SCHROLL, GEORGE
Address: 829 BLUEBONNET COURT
City-St-Zip: MARCO ISLAND, FL 34145

Title: VD ( ) Delete
Name: SHANAHAN, DICK
Address: 427 BARCELONA COURT
City-St-Zip: MARCO ISLAND, FL 34145

Title: PE ( ) Delete
Name: MERRIAM, SKIP
Address: 1642 BARBADOS COURT
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
Name:
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: LUCINDA LOVE M 03/20/2009

Electronic Signature of Signing Officer or Director — Date