

FILED
May 09, 2003 8:00 am
Secretary of State

04-02-2003 90038 028 ****61.25

2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

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

55039248



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2498619

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LOVE, LUCINDA K
101 SANDHILL ST
MARCO FL 33937

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 reappointing)

DATE

3/28/03

FILE NOW: FEE IS \$81.25

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

TITLE PD
NAME FERRARA, CHERLY
STREET ADDRESS P. O. BOX 2547
CITY-ST-ZIP MARCO ISLAND FL 34146 ☒ Delete

TITLE VD
NAME TITGEMEIER, CARL
STREET ADDRESS 815 CARIBBEAN CT.
CITY-ST-ZIP MARCO ISLAND FL 34145 ☒ Delete

TITLE M
NAME LOVE, CINDY
STREET ADDRESS 47 TAHITI RD.
CITY-ST-ZIP MARCO ISLAND FL 34145 ☐ Delete

TITLE TD
NAME KRAUERHASE, GERRY
STREET ADDRESS 175 SOCIETY CT
CITY-ST-ZIP MARCO ISLAND FL ☐ Delete

TITLE V
NAME STAKICH, BOB
STREET ADDRESS 1001 BARFIELD DR
CITY-ST-ZIP MARCO ISLAND FL 34145 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME William Morris
STREET ADDRESS 243 W. Collier Blvd
CITY-ST-ZIP Marco Island, FL 34145 ☐ Change ☒ Addition

TITLE VD
NAME James Curran
STREET ADDRESS 590 Club Marco Cir #201
CITY-ST-ZIP Marco Island, FL 34145 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TD
NAME Khayenase, Gerry
STREET ADDRESS 1106 Dorchester CT.
CITY-ST-ZIP Naples, FL 34104 ☒ Change ☐ Addition

TITLE S
NAME Bob Stakich
STREET ADDRESS 1001 Barfield Dr.
CITY-ST-ZIP Marco Island, FL 34145 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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: ☒ SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Cindy Love, CEO 4/10/03

(239) 394-3144 ext 201