

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25909

FILED
Mar 10, 2009
Secretary of State

Entity Name: THE PLANTATION OF MARCO ISLAND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1000 S. COLLIER BLVD
MARCO ISLAND, FL 33937

New Principal Place of Business:

Current Mailing Address:

1000 S. COLLIER BLVD
MARCO ISLAND, FL 33937

New Mailing Address:

FEI Number: 65-0187802

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACKIE, JOHN G
BANK OF AMERICA CENTER
4501 TAMiami TRAIL N., SUITE 214
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

RESORT MANAGEMENT
834 BALD EAGLE DRIVE
MARCO ISLAND, FL 34145 US

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: RICK YACONO

03/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: CRAIN, JIM
Address: 1000 S. COLLIER BLVD. #107
City-St-Zip: MARCO ISLAND, FL 34145

Title: TD () Delete
Name: YOUNG, HARVEY
Address: 1000 S. COLLIER BLVD #203
City-St-Zip: MARCO ISLAND, FL 34145

Title: PD () Delete
Name: SKINNER, WILLIAM
Address: 1000 S. COLLIER BLVD #705
City-St-Zip: MARCO ISLAND, FL 34145

Title: D () Delete
Name: ALTER, STEVE
Address: 1000 S. COLLIER BLVD #205
City-St-Zip: MARCO ISLAND, FL 34145

Title: D () Delete
Name: RILEY, WILLIAM
Address: 131 W ADELAIDE UNIT 311
City-St-Zip: ELMHURST, IL 60126

Title: SD () Delete
Name: HACKETT, LARRY
Address: 11236 STRAFFORD RD.
City-St-Zip: MOKENA, IL 60448

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: CRAIN, JIM
Address: 196 MAIN STREET UNIT 4
City-St-Zip: GLOUCESTER, MA 01930

Title: TD (X) Change () Addition
Name: YOUNG, HARVEY
Address: 421 SOUTH COUNTRYSIDE DRIVE
City-St-Zip: ASHLAND, OH 44805

Title: PD (X) Change () Addition
Name: SKINNER, WILLIAM
Address: 35023 CARNATION LANE
City-St-Zip: INDIAN LAND, SC 59707

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: WILLIAM SKINNER

P

03/10/2009

Electronic Signature of Signing Officer or Director

Date