2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2012
Secretary of State

DOCUMENT# N35002

Entity Name: MARINE INDUSTRIES ASSOCIATION OF COLLIER COUNTY, INC.

Current Principal Place of Business:

5629 WHISPERWOOD BLVD APT 801
NAPLES, FL 34110

New Principal Place of Business:

Current Mailing Address:

PO BOX 9887
NAPLES, FL 34101

New Mailing Address:

FEI Number: 65-0155602 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOGLUND, SUMMER
5629 WHISPERWOOD BLVD APT 801
NAPLES, FL 34110 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: T
Name: ANDERSON, MICK
Address: 3784 BAYSHORE DRIVE
City-St-Zip: NAPLES, FL 34112

Title: PD
Name: PERRUCCI, FRANK
Address: 1848 HARBOR PLACE
City-St-Zip: NAPLES, FL 34104

Title: VP
Name: ADAMS, GEORGE
Address: 2241 LONGBOAT DRIVE
City-St-Zip: NAPLES, FL 34104

Title: S
Name: CUDDIHY, DAVID
Address: 1100 IMMOKALLEE ROAD
City-St-Zip: NAPLES, FL 34110

Title: D
Name: HOGLUND, SUMMER
Address: 5629 WHISPERWD BLVD APT 801
City-St-Zip: NAPLES, FL 34110

Title: D
Name: SAWYER, CARSON
Address: 3125 BAYSHORE DRIVE
City-St-Zip: NAPLES, FL 34112-

I hereby 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 all other like empowered.

SIGNATURE: SUMMER HOGLUND D 01/05/2012

Electronic Signature of Signing Officer or Director — Date