

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 05, 2009
Secretary of State

DOCUMENT# N40091

Entity Name: KEY MARCO COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**1271 BLUE HILL CREEK DR.
MARCO ISLAND, FL 34145 US**New Principal Place of Business:****Current Mailing Address:**1271 BLUE HILL CREEK DR.
MARCO ISLAND, FL 34145 US**New Mailing Address:****FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TSANDOULAS, GERRY
1217 BLUE HILL CREEK DR
MARCO ISLAND, FL 34145 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: PD () Delete
Name: TSANDOULAS, GERRY
Address: 1217 BLUE HILL CREEK DR
City-St-Zip: MARCO ISLAND, FL 34145Title: ST () Delete
Name: TSANDOULAS, MARIE
Address: 1217 BLUE HILL CREEK DR
City-St-Zip: MARCO ISLAND, FL 34145Title: VPD () Delete
Name: RITSCHER, RON
Address: 21571 BERWHICH RUN
City-St-Zip: ESTERO, FL 33928Title: VPD () Delete
Name: WINFIELD, CLAY
Address: 11421 GOLDEN EAGLE CT
City-St-Zip: NAPLES, FL 34120Title: VPD () Delete
Name: GRADO, CORRIE
Address: 1137 BLUE HILL CREEK DRIVE
City-St-Zip: MARCO ISLAND, FL 34145Title: VPD () Delete
Name: PARKES, JOHANNA
Address: 1223 BLUE HILL CREEK DRIVE
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: VPD (X) Change () Addition
Name: KRUTISCH, HERBERT
Address: 488 RICHARDS COURT
City-St-Zip: MARCO ISLAND, FL 34145Title: VPD (X) Change () Addition
Name: FINLAYSON, JOHN
Address: 1161 BLUE HILL CREEK DRIVE
City-St-Zip: MARCO ISLAND, FL 34145Title: () 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: MARIE K. TSANDOULAS

ST

06/05/2009

Electronic Signature of Signing Officer or Director

Date