

**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 17, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # N94000003560**

1. Entity Name

MARCO LAKE AREA ASSOCIATION, INC.



Principal Place of Business

% DONALD CONDEE, CONDEE COOLING  
25 FRONT STREET  
MARCO ISLAND, FL 34145 US

Mailing Address

% DONALD CONDEE, CONDEE COOLING  
25 FRONT STREET  
MARCO ISLAND, FL 34145 US



01102006 No Chg-NP

CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

65-0558921

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CONDEE, DONALD  
25 FRONT STREET  
MARCO ISLAND, FL 34145

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IN THIS SPACE**

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 reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	CHESTNUT, DIANE
STREET ADDRESS	10 MARCO LAKE DRIVE
CITY-ST-ZIP	MARCO ISLAND, FL
TITLE	DT
NAME	MILLER, WILLIAM B
STREET ADDRESS	20 MARCO LAKE DRIVE SUITE 12
CITY-ST-ZIP	MARCO ISLAND, FL 34145
TITLE	PD
NAME	CONDEE, DON
STREET ADDRESS	25 FRONT STREET
CITY-ST-ZIP	MARCO ISLAND, FL
TITLE	D
NAME	NAIFEH, TOM
STREET ADDRESS	30 MARCO LAKE DR.
CITY-ST-ZIP	MARCO ISLAND, FL 34145
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/20/06-80050-005 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:**

*Donald Condee* **DONALD CONDEE** 1/12/06 239 394 5121

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #