

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2008 8:00 am
Secretary of State

02-25-2008 90048 002 ****61.25

DOCUMENT # N99000007648

1. Entity Name
ISLAND COUNTRY CLUB CHARITABLE FOUNDATION, INC.



Principal Place of Business
**500 NASSAU CT
MARCO ISLAND, FL 34145**

Mailing Address
**500 NASSAU CT
MARCO ISLAND, FL 34145**

40051230



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01292008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-3618210

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

**MCARDLE, MICHAEL W
850 PARK SHORE DR
NAPLES, FL 34103**

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 reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DCP
BLCKWELL, WESLEY
870 S COLLIER BLVD, PHB
MARCO ISLAND, FL 34145** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DIRECTOR
CHARLES RITER
530 S. COLLIER BLVD
MARCO ISLAND, FL 34145** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
CORMIER, STEVE
85 SOUTH SEAS COURT
MARCO ISLAND, FL 34145** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DIRECTOR
BYRON FARREL
826 BANYAN COURT
MARCO ISLAND, FL 34145** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
LEVISON, CAROLEE
P.O. BOX 1028
MARCO ISLAND, FL 34145** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DIRECTOR
ANDREA MCCREANOR
551 CONOVER COURT
MARCO ISLAND, FL 34145** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
FUREK, ROBERT
1370 CUTLER COURT
MARCO ISLAND, FL 34145** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

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

TITLE
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STREET ADDRESS
CITY - ST - ZIP
☐ Delete

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/19/2008

239-394-6661

Date

Daytime Phone #