## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000010704

Name:

Address:

City-St-Zip:

**Entity Name:** MARCO COMMUNITY BANCORP, INC.

FILED Apr 05, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1501 PARK AVENUE EAST 1770 SAN MARO RD TALLAHASSEE, FL MARCO ISLAND, FL 34145 **Current Mailing Address: New Mailing Address:** 1501 PARK AVENUE EAST 1770 SAN MARCO RD TALLAHASSEE, FL MARCO ISLAND, FL 34145 FEI Number: 84-1620092 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: IGLER & DOUGHERTY, P.A. 1501 PARK AVENUE EAST TALLAHASSEE, FL 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: ( ) Change (X) Addition STORM, JR, RICHARD S CHMN Name: Name: 1770 SAN MARCO RD Address: Address: City-St-Zip: City-St-Zip: MARCO ISLAND, FL 34145 Title: Title: VCHM ( ) Change (X) Addition () Delete MCLAUGHLIN, STEVE VCHMN Name: Name: 1770 SAN MARCO RD Address: Address: MARCO ISLAND, FL 34145 City-St-Zip: City-St-Zip: Title: Title: () Delete OFF ( ) Change (X) Addition COX, JOEL OFFICER Name: Name: 1770 SAN MARCO RD Address Address: City-St-Zip: City-St-Zip: MARCO ISLAND, FL 34154 Title: () Delete Title: CHMN ( ) Change (X) Addition MARKS, BOB OFFICER Name: Name: Address: Address: 1770 SAN MARCO RD City-St-Zip: City-St-Zip: MARCO ISLAND, FL 34145 Title: Title: ( ) Change (X) Addition ( ) Delete

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: RICHARD STORM, JR CEO 04/05/2004

SKONE, TERRY OFFICER

MARCO ISLAND, FL 34145

1770 SAN MARCO RD