

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90310 017 \*\*\*150.00

**DOCUMENT # P03000010704**

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



40071210

Principal Place of Business  
1770 SAN MARO RD  
MARCO ISLAND, FL 34145

Mailing Address  
1770 SAN MARCO RD  
MARCO ISLAND, FL 34145

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04132006 Chg-P CR2E034 (11/05)

4. FEI Number  
84-1620092

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

**IGLER & DOUGHERTY, P.A.**  
1501 PARK AVENUE EAST  
TALLAHASSEE, FL

## 7. Name and Address of New Registered Agent

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CEO  
STORM, JR, RICHARD S CHMN  
1770 SAN MARCO RD  
MARCO ISLAND, FL 34145 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VCHM  
MCLAUGHLIN, STEVE VCHMN  
1770 SAN MARCO RD  
MARCO ISLAND, FL 34145 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DIR  
COX, JOEL DIR  
1770 SAN MARCO RD  
MARCO ISLAND, FL 34154 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DIR  
MARKS, BOB DIR  
1770 SAN MARCO RD  
MARCO ISLAND, FL 34145 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DIR  
SKONE, TERRY DIR  
1770 SAN MARCO RD  
MARCO ISLAND, FL 34145 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
OFF  
MICALLEF, MICHAEL A OFF  
1770 SAN MARCO ROAD  
MARCO ISLAND, FL 34145 ☒ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
Fedor, Bruce G.  
28171 Winthrop Circle  
Bonita Springs, FL 34134 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
Gheusel, Jamie B.  
1104 D Collier Blvd  
Marco Island, FL 34145 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
Cofey, John V  
242 Grapewood Ct  
Marco Island, FL 34145 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
Hanson, Melanie A.  
911 Whiskey Creek Dr.  
Marco Island, FL 34145 ☐ Change ☒ Addition

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 607, 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

4/13/06 (239) 389-5200

Date

Daytime Phone #