2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008
Secretary of State

DOCUMENT# P03000010704

Entity Name: MARCO COMMUNITY BANCORP, INC.

Current Principal Place of Business:

1770 SAN MARO RD
MARCO ISLAND, FL 34145

New Principal Place of Business:

Current Mailing Address:

1770 SAN MARCO RD
MARCO ISLAND, FL 34145

New Mailing Address:

FEI Number: 84-1620092 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	CEO	( ) Delete
Name:	STORM , JR, RICHARD S CHMN	
Address:	1770 SAN MARCO RD	
City-St-Zip:	MARCO ISLAND, FL 34145	
Title:	VCHM	( ) Delete
Name:	MCLAUGHLIN, STEVE VCHMN	
Address:	1770 SAN MARCO RD	
City-St-Zip:	MARCO ISLAND, FL 34145	
Title:	DIR	( ) Delete
Name:	COX, JOEL DIR	
Address:	1770 SAN MARCO RD	
City-St-Zip:	MARCO ISLAND, FL 34154	
Title:	DIR	( ) Delete
Name:	MARKS, BOB DIR	
Address:	1770 SAN MARCO RD	
City-St-Zip:	MARCO ISLAND, FL 34145	
Title:	DIR	( ) Delete
Name:	SKONE, TERRY DIR	
Address:	1770 SAN MARCO RD	
City-St-Zip:	MARCO ISLAND, FL 34145	
Title:	S	( ) Delete
Name:	FEDOR, BRUCE G	
Address:	28171 WINTHROP CIRCLE	
City-St-Zip:	BONITA SPRINGS, FL 34134	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS M WHELAN SVP 04/16/2008

Electronic Signature of Signing Officer or Director Date