

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718197

Entity Name: ART LEAGUE OF MARCO ISLAND, INC.**Current Principal Place of Business:**1010 WINTERBERRY DRIVE
MARCO ISLAND, FL 34145-5427**Current Mailing Address:**1010 WINTERBERRY DRIVE
MARCO ISLAND, FL 34145-5427 US**FEI Number:** 59-1754367**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HILL, JOHN R
606 BALD EAGLE DRIVE STE 400
MARCO ISLAND, FL 34145 US*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

Officer/Director Detail :

Title DIRECTOR
Name PALOMBO, MARY PAT
Address 1771 LUDLOW ROAD
City-State-Zip: MARCO ISLAND FL 34145

Title PRESIDENT
Name RICHARDS, JIM
Address 1884 CASCADE CT.
City-State-Zip: MARCO ISLAND FL 34145

Title DIRECTOR
Name PORTER, KIMBERLY
Address 189 MAJORCA CIRCLE
City-State-Zip: MARCO ISLAND FL 34145

Title DIRECTOR
Name ANZALONE, JAY
Address 870 S. COLLIER BLVD.
UNIT 402
City-State-Zip: MARCO ISLAND FL 34145

Title VP
Name RODDY, DEBBIE
Address 1060 BORGHESE LN.
UNIT 1103
City-State-Zip: NAPLES FL 34114

Title SECRETARY
Name KING, CHARLANE
Address 8352 LUCELLO TERR. N.
City-State-Zip: NAPLES FL 34114

Title TREASURER
Name DOUGHERTY, JOHN
Address 720 N. COLLIER BLVD.
UNIT 204
City-State-Zip: MARCO ISLAND FL 34145

Title DIRECTOR
Name BLUM, CHARLIE
Address 1270 LILY CT.
City-State-Zip: MARCO ISLAND FL 34145

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I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN DOUGHERTY**TREASURER****04/28/2023**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KOPPEL, CHRISTINE
Address 45 MADAGASCAR CT.
City-State-Zip: MARCO ISLAND FL 34145

Title DIRECTOR
Name WAGOR, TOM
Address 1414 JAMAICA RD.
City-State-Zip: MARCO ISLAND FL 34145

Title DIRECTOR
Name WHEELER, GARRY
Address 7026 DOMINICA DR.
City-State-Zip: MARCO ISLAND FL 34145

Title DIRECTOR
Name SPRINGER, CYNTHIA
Address 4000 ROYAL MARCO WAY
UNIT 529
City-State-Zip: MARCO ISLAND FL 34145

Title DIRECTOR
Name BELLINI, DIANA
Address 1011 SWALLOW AVE.
UNIT 108
City-State-Zip: MARCO ISLAND FL 34145