

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709211

FILED
Jan 10, 2009
Secretary of State

Entity Name: MARINA HARBOUR ASSOCIATION, INC.

Current Principal Place of Business:

68 YACHT CLUB DRIVE
NORTH PALM BEACH, FL 334080934

New Principal Place of Business:

Current Mailing Address:

68 YACHT CLUB DRIVE
NORTH PALM BEACH, FL 334080934

New Mailing Address:

FEI Number: 59-2204270

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAIN, MICHAEL
68 YACHT CLUB DR
#23
NORTH PALM BEACH, FL 33408 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

OFFICERS AND DIRECTORS:

Title: TRES () Delete
Name: WAIN, MICHAEL
Address: 68 YACHT CLUB DR #22
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D () Delete
Name: ANDERSON, AUDREY
Address: 68 YACHT CLUB DR #18
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D () Delete
Name: SCALISE, RICK
Address: 68 YACHT CLUB DR, # 21
City-St-Zip: NORTH PALM BEACH, FL 334063934

Title: PRES () Delete
Name: ROGER, WILLIS
Address: 68 YACHT CLUB DR
City-St-Zip: NORTH PALM BEACH, FL

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:

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

SIGNATURE: MICHAEL WAIN

TRES

01/10/2009

Electronic Signature of Signing Officer or Director

_____ Date