

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 05, 2009
Secretary of State

DOCUMENT# 729992

Entity Name: MARINA DEL MAR, INC.

Current Principal Place of Business:1500-1510 SE 15TH STREET
FORT LAUDERDALE, FL 33316**New Principal Place of Business:****Current Mailing Address:**MARINA DEL MAR
1220 MIAMI RD. #6
FT LAUDERDALE, FL 33316 US**New Mailing Address:**1500-1510 SE 15TH STREET
FORT LAUDERDALE, FL 33316

FEI Number: 59-1593404

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:SHOOP, THOMAS V
1220 MIAMI RD.
#6
FT LAUDERDALE, FL 33316 US**Name and Address of New Registered Agent:**LAW OFFICE OF ROBERT P. KELLY
2514 HOLLYWOOD BLVD
STE 307
HOLLYWOOD, FL 33020 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: ROGER G. PICKLES, ESQ.

06/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: S () Delete
Name: COHEN, ROSEMARY
Address: 1510 SE 15TH ST
City-St-Zip: FORT LAUDERDALE, FL 33316Title: PD () Delete
Name: MURPHY, PAUL
Address: 1510 SE 15TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33316Title: D () Delete
Name: MUELLER, JASON
Address: 1510 SE 15TH ST
City-St-Zip: FT LAUDERDALE, FL 33316Title: T () Delete
Name: CARROLL, NORMA
Address: 1510 S E 15TH ST
City-St-Zip: FT LAUDERDALE, FL 33316Title: D () Delete
Name: RINDONE, DIANE
Address: 1500 SE 15TH ST
City-St-Zip: FORT LAUDERDALE, FL 33316**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:

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: PAUL MURPHY

PD

06/05/2009

Electronic Signature of Signing Officer or Director

Date