


**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT (AR)**

**FILED**  
**May 01, 2007 8:00 am**  
**Secretary of State**

05-01-2007 90010 013 \*\*\*\*61.25

**DOCUMENT # 743173**  
1. Entity Name  
**MARINA VILLAGE CONDOMINIUM PHASE III, INC.**



Principal Place of Business Mailing Address  
120 ANCHOR DR 120 ANCHOR DR  
KEY LARGO FL 33037 KEY LARGO FL 33037  
US US

2. Principal Place of Business - No P.O. Box # 3. Mailing Address  
**10 Barracuda Lane 10 Barracuda Lane**  
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State  
**Key Largo, FL Key Largo, FL**

Zip Country Zip Country  
**33037 USA 33037 USA**

4. FEI Number Applied For  
**59-1900462** Not Applicable

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

6. Name and Address of Current Registered Agent  
**MOSS, EVELYN  
120 ANCHOR DR  
STE 476  
KEY LARGO FL 33037**

7. Name and Address of New Registered Agent  
Name **Moss, Evelyn**  
Street Address (P.O. Box Number is Not Acceptable)  
**10 Barracuda Lane**  
City **Key Largo FL** Zip Code **33037**

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 \$61.25  
Due By May 1, 2007**

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

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	POA <input type="checkbox"/> Delete <b>MOSS, EVELYN 120 ANCHOR DR KEY LARGO FL 33037</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD <input type="checkbox"/> Delete <b>DOUVAS, NICHOLAS 120 ANCHOR DR KEY LARGO FL 33037</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input type="checkbox"/> Delete <b>REIS, BARBARA 120 ANCHOR DR KEY LARGO FL 33037</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	POA <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Moss, Evelyn 10 Barracuda Lane Key Largo, FL 33037</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Douvas, Nicholas 10 Barracuda Lane Key Largo, FL 33037</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Reis, Barbara 10 Barracuda Lane Key Largo, FL 33037</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Lampl, Carolyn 10 Barracuda Lane Key Largo, FL 33037</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 617, 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:** *Evelyn Moss* **Evelyn Moss** **4/23/07** **305-367-3232**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #