

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743173

FILED
Apr 23, 2009
Secretary of State

Entity Name: MARINA VILLAGE CONDOMINIUM PHASE III, INC.

Current Principal Place of Business:

1 BARRACUDA LANE
KEY LARGO, FL 33037 US

New Principal Place of Business:

Current Mailing Address:

24 DOCKSIDE LANE
PMB 450
KEY LARGO, FL 33037

New Mailing Address:

FEI Number: 59-1900462 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOSS, EVELYN
1 BARRACUDA LANE
KEY LARGO, FL 33037 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: D () Delete
Name: DOUVAS, NICHOLAS
Address: 21 MARINA VILLAGE, UNIT 21B
City-St-Zip: KEY LARGO, FL 33037

Title: PD () Delete
Name: REIS, BARBARA
Address: 23 MARINA VILLAGE, UNIT 23B
City-St-Zip: KEY LARGO, FL 33037

Title: STD () Delete
Name: LAMPL, CAROLYN
Address: 21 MARINA VILLAGE, UNIT 21A
City-St-Zip: KEY LARGO, FL 33037

Title: VPD (X) Delete
Name: COWAN, OSTELLA
Address: 24 MARINA VILLAGE, UNIT 24B
City-St-Zip: KEY LARGO, FL 33037

Title: D (X) Delete
Name: DALIA, PHYLLIS
Address: 24 MARINA VILLAGE, UNIT 24A
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: REIS, BARBARA
Address: 23 MARINA VILLAGE, UNIT 23B
City-St-Zip: KEY LARGO, FL 33037

Title: VPD (X) Change () Addition
Name: COWAN, OSTELLA
Address: 24 MARINA VILLAGE, UNIT 24B
City-St-Zip: KEY LARGO, FL 33037

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: BARBARA REIS

PD

04/23/2009

Electronic Signature of Signing Officer or Director

_____ Date