


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 11, 2006 8:00 am**  
**Secretary of State**

04-11-2006 90109 010 \*\*\*\*61.25

**DOCUMENT # 745442**

1. Entity Name  
**MARINA TOWERS AND YACHT CLUB CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business  
**8401 ESTERO BLVD.  
 FT MYERS BEACH, FL 33931-5106**

Mailing Address  
**C/O TOP MANAGEMENT  
 16681 MCGREGOR BLVD #104  
 FT MYERS, FL 33908 US**

**00040431**



2. Principal Place of Business  
 Suite, Apt. #, etc.  
 City & State  
 Zip

3. Mailing Address  
 Suite, Apt. #, etc.  
 City & State  
 Zip

01102006 Chg-NP CR2E037 (11/05)

4. FEI Number  
**59-1630568**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
**TOP MANAGEMENT OF SW FL INC.  
 16681 MCGREGOR BLVD  
 SUITE 104  
 FT MYERS, FL 33908**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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

**Filing Fee is \$61.25 Due by May 1, 2006**

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JONES, RAY 8401 ESTERO BLVD, STE 607 FT MYERS BCH, FL 33931 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>TD</del> <del>SAWYER, RICHARD</del> <del>8401 ESTERO BLVD, STE 401</del> <del>FT MYERS BCH, FL 33931</del> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TO MAGNUSON, Kenneth <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8401 ESTERO BLVD FT MYERS BEACH, FL 33931
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MAAS, WILLIAM 8401 ESTERO BLVD #506 FT MYERS BCH, FL 33931 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>PD</del> <del>COOK, CHARLES</del> <del>8401 ESTERO BLVD, STE 802</del> <del>FT MYERS BCH, FL 33931</del> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR MARKWILL STEVE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8401 ESTERO BLVD FT MYERS BEACH FL 33931
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>D</del> SCHULTZ, RICHARD 8401 ESTERO BLVD #508 FT MYERS BEACH, FL 33531 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	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 Chapter 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: William Maas March 20, 2006  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #