


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90173 023 ****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
**PO BOX 60847
 FORT MYERS, FL 33906 US**

60032904



2. Principal Place of Business - No P.O. Box # _____ Mailing Address _____

Suite, Apt. #, etc. _____ **Alliant Property Management, LLC** 04112008 Chg-NP CR2E037 (12/06)
6719 Winkler Rd. Suite 200

City & State _____ **Fort Myers, FL 33919**

Zip _____ Country _____

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

~~SPRING, SHANE
 SUNSET MANAGEMENT GROUP
 12811 KENWOOD LN SUITE 210
 FORT MYERS, FL 33907~~

7. Name and Address of New Registered Agent

Name _____
 Street **Alliant Property Management, LLC**
6719 Winkler Rd. Suite 200
 City **Fort Myers, FL 33919** p 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 *Michelle Stovall* **AGENT** 4-28-08
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, 2008**

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	SD JONES, RAY 8401 ESTERO BLVD, STE 607 FT MYERS BCH, FL 33931	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MAGNVSON, KENNETH 9401 ESTERO BLVD FORT MYERS BEACH, FL 33931	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MAAS, WILLIAM 8401 ESTERO BLVD #506 FT MYERS BCH, FL 33931	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARKWELL, STEVE 8401 ESTERO BLVD FT MYERS BCH, FL 33931	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SCHULTZ, RICHARD 8401 ESTERO BLVD #508 FT MYERS BEACH, FL 33531	<input checked="" 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		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Kenneth Magnuson 11578 E Lake Ethnice Rd Detroit Lakes, MN 56501	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Steve Markwell 8401 Estero Blvd #308	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Charlie Prentiss 8401 Estero Blvd #102 Ft Myers Beach, FL 33931	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Roy Pirain 3325 Ponoka Rd Pittsburgh, PA 15241	<input type="checkbox"/> Change <input checked="" 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: *Kenneth Magnuson* **TR** 4-28-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #