## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)					FILED Apr 23, 2003 8:00 am Secretary of State			
DOCUMENT # 755705					S	ecretar	y of Sta	ate
<ol> <li>Entity Nam</li> </ol>			04-23-2003 90272 013 ****61.25					
MARINA I	SLES CONDOMINIUM ASSOCI	ATION, INC.						
Principal Plac	e of Business	Mailing Address						
ireen, Debl	·	Green, Debbie	pri Property Mgmt. Inc.					
C/O Capri Property Mgmt. Inc.  10B Pinebrook Rd.  C/O Capri Pro 810B Pinebrook					i 100() i 1009) #1	6) ANN 1891 SANG ENGLEN	800 81811 81 <b>8</b> 16 81811 41 <b>9</b>	If EIDIF HOOT
	34292	Venice, FL 34292						
z. Principal P	race or Business	o. waning Address			10815  1000F B1	<b>#1 #</b> 1(1)1 [8 8]1 8 8 70 9 8 10 10 10 1	DIK DAMAN DABAN DABAN DAD	
Suite, Apt. #, etc. Su		Suite, Apt. #, etc.	iuite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES			
City & State C		City & State	ity & State		4. FEI Number 59-2314569 Applied For Not Applicable			
Zip	Country	Zip	Country		5. Certificate of Sta	itus Desired	\$8.75 Add Fee Require	
,	6. Name and Address of Current R	egistered Agent			7. Name and Add	ess of New Registe	ered Agent	
_	· · · · · · · · · · · · · · · · · · ·	<u>-</u>	Green, D	ebbie	e en la fair interferir 17		,=	7
KEITH, J.			C/O Capt	ri Proper	ty Mgmt. Inc.	• • • • •		
MARINA ISLES CONDO ASSOC. INC. 16 CHURCH ST.			810B Pin					
OSPREY FL 34229			Venice, FL 34292					
			1 1				FL   Zip Codi	8
SIGNATURE .	Signature, typed or printed name of registered agent an		E: Registered Agent signat		nen reinstating)	C	-21-03 heck Payable	to
	9	Trust Fund (	Contribution.		dded to Fees	Florida De	epartment of S	State
10.	OFFICERS AND DIRE	CTORS	11.		DITIONS/CHANGE	S TO OFFICERS AN		. (47)
TITLE	P TORIN EDWARD	☐ Delete	, TITLE	TORIN	), EDWARD		Change	Addition
NAME STREET ADDRESS	TOBIN, EDWARD  150 MARINA ISLES DR #108		: NAME STREET ADDRESS	TODIN	U, E DWARES			};
CITY-ST-ZIP	ENGELWOOD FL 34-2223		CITY-ST-ZIP					
TITLE	VP	Delete	TITLE	VP			☐ Change	Addition
NAME	BARBER, JUNE	-	NAME	ANDE	ERSON, GI	ARY ORN AVE	<del>.</del>	
STREET ADDRESS CITY-ST-ZIP	150 MARINA ISLES DR. #201 ENGLEWOOD FL 34223		STREET ADDRESS CITY-ST-ZIP					ļ
TITLE	T	☐ Delete	TITLE	12	•	-L.3422	<u>د</u> الآم الآم	Addition
NAME	GAGNON, AL	□ Detete	NAME	BYW	ATEL JOS BROOKWO	GPH .	onango	a location
STREET ADDRESS	150 MARINA ISLES DR. UNIT 301		STREET ADDRESS	916	BROOKWO	OD DR.	3	
CITY-ST-ZIP	ENGLEWOOD FL 34223		CITY-ST-ZIP	LAK	(ELAND,	FL 3381		
TITLE	D MCCONEGBY, JANET	Delete	TITLE	5	DANGER	HANAGEM	☐ Change	Addition
NAME Street address	150-MARINA ISLES DR. #508		NAME STREET AODRESS	810	B PINEA	ROOK RD		
CITY-ST-ZIP	ENGLEWOOD FL 34223		CITY-ST-ZIP		CE, FL			
TITLE	D	Delete	TITLE			· •	☐ Change	☐ Addition
NAME	ECK, JAMES		NAME					
STREET ADDRESS CITY-ST-ZIP	150 MARINA ISLES DR #612		STREET ADDRESS CITY-ST-ZIP					
TITLE	ENGLEWOOD FL 34223	Delete	TITLE				Change	☐ Addition
NAME	KEITH, J. LLOYD	Je Delete	NAME					

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

STREET ADDRESS

CITY-ST-ZIP

**SIGNATURE:** 

16 CHURCH ST

OSPREY FL 34229

NAME STREET ADDRESS

CITY-ST-ZIP