

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761270

FILED  
Mar 31, 2006  
Secretary of State

**Entity Name:** MARINATOWN VILLAGE, A CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O BENSON'S INC  
12650 WHITEHALL DR  
FORT MYERS, FL 33907 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O BENSON'S, INC.  
12650 WHITEHALL DRIVE  
FORT MYERS, FL 339073619 US

**New Mailing Address:**

**FEI Number:** 59-2393150

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BENSON, MARK R  
C/O BENSON'S INC  
12650 WHITEHALL DR  
FORT MYERS, FL 33907 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: VD ( ) Delete  
Name: RIPETOE, KATHLEEN  
Address: 1051 PALM AVE #121  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: SD ( ) Delete  
Name: HORN, JANICE  
Address: 1055 PALM AVE #214  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: TD ( ) Delete  
Name: COKEL, CINDY  
Address: 1051 PALM AVE #127  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: D ( ) Delete  
Name: SWANSON, ERNEST  
Address: 1051 PALM AVE #116  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: PD ( ) Delete  
Name: FITZGERALD, KATHLEEN  
Address: 1055 PALM AVE #215  
City-St-Zip: NORTH FORT MYERS, FL 33903

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VD (X) Change ( ) Addition  
Name: CONAWAY, DOREEN  
Address: 1051 PALM AVE #111  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: TD (X) Change ( ) Addition  
Name: MCLEAN, MARSHALL  
Address: 1051 PALM AVE #117  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: SD (X) Change ( ) Addition  
Name: COKEL, CINDY  
Address: 1051 PALM AVE #127  
City-St-Zip: NORTH FORT MYERS, FL 33903

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 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: KATHLEEN FITZGERALD

PRES

03/31/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date