2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03035

FILED Mar 10, 2009 Secretary of State

Entity Name: EBB TIDE CLUB OF MARCO ISLAND CONDOMINIUM CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place of Business:	New Principal Place of Business:		
2B MARCO ISLAND, FL 34146			871 COLLIER CT. MARCO ISLAND, FL 34145			
Current M	lailing Addres	ss:	New Mailing Address:	New Mailing Address:		
871 COLLI	ER CT.		871 COLLIER CT			
2 MARCO IS	SLAND, FL 34	1145	MARCO ISLAND, FL 34145			
FEI Number:	: 59-2405785	FEI Number Applied For()	FEI Number Not Applicable () Certificate of Sta	atus Desired ()		
Name and	Address of (Current Registered Agent:	Name and Address of New Registered	l Agent:		
MARCO IS The above	IER CT- 2B SLAND, FL 34		KNAPP, JANE W 871 COLLIER CT- 3A MARCO ISLAND, FL 34145 US ourpose of changing its registered office or register	ed agent, or both,		
	RE: JANE W.	KNAPP	03/10/20	009		
01011/1101		nic Signature of Registered A				
OFFICERS	S AND DIREC	CTORS:	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D (WAMBACH, KU 871 COLLIER MARCO ISLAN	CT #A3	Title: () Change () Additi Name: Address: City-St-Zip:	on		
Title: Name: Address: City-St-Zip:	P (SMITH, HAL 871 COLLIER MARCO ISLAN		Title: D (X) Change () Additi Name: SMITH, HAL Address: 871 COLLIER CT. #B3 City-St-Zip: MARCO ISLAND, FL 34146	on		
Title: Name: Address: City-St-Zip:	T (BERG, MARY A 871 COLLIER MARCO ISLAN	COURT #B2	Title: S (X) Change () Additi Name: BERG, MARY ANN Address: 871 COLLIER COURT #B2 City-St-Zip: MARCO ISLAND, FL 34145	on		
Title: Name: Address: City-St-Zip:	S (CARLA, LOME 871 COLLIER MARCO ISLAN	COURT- #A2	Title: P (X) Change () Additi Name: CARLA, LOMENTZO Address: 871 COLLIER COURT- #A2 City-St-Zip: MARCO ISLAND, FL 34145	on		
Title:	() Delete	Title: T () Change (X) Additi	on		

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: JANE KNAPP TREA 03/10/2009