2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007253

FILED Apr 13, 2009 Secretary of State

Entity Name: MARINA SOUTH AT CAPE HARBOUR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O REALMARK MANAGEMENT SERVICES, LLC 5828 CAPE HARBOUR DRIVE, SUITE 102 CAPE CORAL, FL 33914

Current Mailing Address: New Mailing Address:

C/O REALMARK MANAGEMENT SERVICES, LLC 5828 CAPE HARBOUR DRIVE, SUITE 102 CAPE CORAL, FL 33914

FEI Number: 20-5128574 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BOLANOS TRUXTON, P.A. 12800 UNIVERSITY DRIVE SUITE 350 FT. MYERS, FL 33907 US

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:

Flateric Constant Devices Advantage

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: DEARDEN, CRAIG A Name: FORD, CHARLOTTE

Address: 5789 CAPE HARBOUR DR., #201 Address: 5781 CAPE HARBOUR DR., #605
City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: CAPE CORAL, FL 33914

Title: VTD () Delete Title: VTD (X) Change () Addition

 Name:
 KIRKMAN, JANE
 Name:
 ACHILLES, WAYNE

 Address:
 5789 CAPE HARBOUR DR #201
 Address:
 1622 SE 39TH TERRACE

 City-St-Zip:
 CAPE CORAL, FL 33914
 City-St-Zip:
 CAPE CORAL, FL 33904

Title: SD () Delete Title: SD (X) Change () Addition

Name: MURPHY, SHARON Name: MURPHY, SHARON

 Address:
 5781 CAPE HARBOUR DR #1402
 Address:
 5781 CAPE HARBOUR DR., #1409

 City-St-Zip:
 CAPE CORAL, FL 33914
 City-St-Zip:
 CAPE CORAL, FL 33914

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: CHARLOTTE FORD PD 04/13/2009