

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06190

FILED  
Jan 28, 2012  
Secretary of State

**Entity Name:** TREASURE ISLAND LAGOONS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O MARJORIE A. LINSLEY 9901 1ST ST EAST  
UNIT E  
TREASURE ISLAND, FL 33706 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O MARJORIE A. LINSLEY 9901 1ST ST EAST  
UNIT E  
TREASURE ISLAND, FL 33706 US

**New Mailing Address:**

FEI Number: 59-2476122      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

LINSLEY, MARJORIE A STD  
9901 1ST ST EAST  
UNIT E  
TREASURE ISLAND, FL 33706 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: DVP  
Name: DEFILIPPI, ERNIE VP  
Address: 9901 1ST STREET E UNIT A  
City-St-Zip: TREASURE ISLAND, FL 33706

Title: STD  
Name: LINSLEY, MARJORIE A  
Address: 9901 1ST ST E UNIT E  
City-St-Zip: TREASURE ISLAND, FL 33706 US

Title: PD  
Name: BARNES, BARRY  
Address: 32 FELTON LEA  
City-St-Zip: SIDEUP, KENT, EN

I hereby 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 all other like empowered.

SIGNATURE: MARJORIE A. LINSLEY

STD

01/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date