2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000840

FILED Feb 04, 2009 Secretary of State

Entity Name: THE MARTIN MASTER PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:		
101 CHANNELSIDE DR SUITE 240 TAMPA, FL 33602		1101 CHANNELSIDE 240 TAMPA, FL 33602	- : -		
Current Mailing Address:		New Mailing Address:			
	NNELSIDE DR SU L 33602	JITE 240	1101 CHANNELSIDE 240 TAMPA, FL 33602	E DR	
El Number	: 20-8302221 F	El Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
	DANIEL G ESQ				
2004 RA AMPA, F he above the Stat	CE TRACK RD L 33626 US e named entity suble e of Florida.	mits this statement for the _l	ourpose of changing its register	ed office or registered agent, or both,	
2004 RÁ AMPA, F he above	CE TRACK RD L 33626 US named entity suble of Florida. RE:	mits this statement for the positions of the positions of Registered Agriculture of Registered Agriculture of Registered Agriculture		ed office or registered agent, or both, Date	
2004 RAI AMPA, F he above the Stat IGNATU	CE TRACK RD L 33626 US named entity suble of Florida. RE:	Signature of Registered Ag	ent	ed office or registered agent, or both, Date DES TO OFFICERS AND DIRECTOR	
2004 RAI AMPA, F he above the Stat IGNATU	CE TRACK RD L 33626 US e named entity suble of Florida. RE: Electronic S	Signature of Registered Ag RS: ete EN	ent	Date	
2004 RAI AMPA, F ne above the State GNATU FFICER ame: Idress:	CE TRACK RD L 33626 US e named entity suble of Florida. RE: Electronic S S AND DIRECTOI DPT () Del STOLTENBERG, KE 1101 CHANNELSID	Signature of Registered Ag RS: ete EN E DR SUITE 240 ete K	ent ADDITIONS/CHANC Title: Name: Address:	Date GES TO OFFICERS AND DIRECTO	

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: F. BOMBEECK DVS 02/04/2009