2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 11, 2009
Secretary of State

DOCUMENT# N23228

Entity Name: MARINA PARK HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

9150 BLIND PASS ROAD
ST PETERSBURG BEACH, FL 33706 US

New Principal Place of Business:

Current Mailing Address:

9172 BLIND PASS ROAD
ST PETERSBURG BEACH, FL 33706 US

New Mailing Address:

FEI Number: 59-2897475 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HELTON, MAUREEN
9172 BLIND PASS ROAD
ST.PETERSBURG BEACH, 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: PD ( ) Delete
Name: DALBO, ELIZABETH
Address: 9154 BLIND PASS ROAD
City-St-Zip: ST PETERSBURG BEACH, FL 33706 US

Title: D (X) Delete
Name: ERICKSON, ELOYNE
Address: 9170 BLIND PASS RD
City-St-Zip: ST PETERSBURG BEACH, FL 33706 US

Title: VP (X) Delete
Name: ROMANO, JUDY
Address: 9160 BLIND PASS RD
City-St-Zip: ST PETERSBURG BEACH, FL 33706 US

Title: T ( ) Delete
Name: SKIPPER, DEBRA
Address: 9168 BLIND PASS ROAD
City-St-Zip: ST PETERSBURG BEACH, FL 33706 US

Title: S ( ) Delete
Name: HELTON, MAUREEN
Address: 9172 BLIND PASS ROAD
City-St-Zip: ST PETERSBURG BEACH, FL 33706 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GOLINO, DOMINIC
Address: 9152 BLIND PASS ROAD
City-St-Zip: ST PETERSBURG BEACH, FL 33706 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VS (X) Change ( ) Addition
Name: HELTON, MAUREEN
Address: 9172 BLIND PASS ROAD
City-St-Zip: ST PETERSBURG BEACH, FL 33706 US

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: MAUREEN HELTON VS 05/11/2009

Electronic Signature of Signing Officer or Director — Date