2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001168

FILED Mar 27, 2009 Secretary of State

Entity Name: THE MARQUESA AT BAY COLONY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 8990 BAY COLONY DR. NAPLES, FL 34108 **Current Mailing Address: New Mailing Address:** 8990 BAY COLONY DR. NAPLES, FL 34108 FEI Number: 74-2844327 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: BECKER & POLIAKOFF P.A. C/O JOS E. ADAMS 999 VANDERBILT BEACH ROAD SUITE 501 NAPLES, FL 34108 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BARBER, JOHN Name: Name: 8990 BAY COLONY DRIVE #702 Address: Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: Title: () Delete Title: PD (X) Change () Addition REGEL, JIM Name: REGEL, JIM Name: Address: 8990 BAY COLONY DR #901 Address: 8990 BAY COLONY DR #901 City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34108 Title: () Delete Title: () Change () Addition VALLACE, ANTHONY Name: Name: 8930 BAY COLONIAL DRIVE #804 Address: Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: (X) Change () Addition Title: () Delete Title: VD SCANLON, TIMOTHY Name: Name: ST. GERMAIN, PHIL 8990 BAY COLONY DRIVE #1101 8990 BAY COLONY DRIVE #802 Address: Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34108 Title: () Delete Title: (X) Change () Addition HARDY, JACK HARDY, JACK Name: Name: 8990 BAY COLONY DR #401 8990 BAY COLONY DR #401 Address: Address: NAPLES, FL 34108 NAPLES, FL 34108 City-St-Zip: City-St-Zip:

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: JIM REGEL PRES 03/27/2009