2001 UNIFORM BUSINESS REPORT (UBR)

May 16, 2001 8:00 am. Secretary of State DOCUMENT # N9700005660 1. Entity Name 05-16-2001 90038 007 ****61.25 MARINA POINT MASTER ASSOCIATION, INC. Mailing Address Principal Place of Business C/O SOUTHEAST MIGHT 600 MARINA PT DR DAYTONA BEACH FL 32114 3511 S PENINSULA DR DAYFONA BEACH FL 32127 3. Mailing Address 2. Principal Place of Business 555 W. GRANADA BLVD. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. SUITE G-10 Applied For 4. FEI Number City & State ... City & State 59-3495521 Not Applicable ORMOND BEACH, Country Ζíρ \$8.75 Additional Zip Country 5. Certificate of Status Desired 32174 Fee Required VOLUSIA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DALE J. ABBOTT Street Addiese 5.0 Box Number is Not Acceptable PARKES, KAREN STE G-10 3511 S. PENINSULA DRIVE DAYTONA BEACH FL 32127 Zip Code 32174 City ORMOND BEACH 8. 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 (NOTE: Registered Agent signature required when reinstating) registered agent and title if applicable 9. Election Campaign Financing Make Check Payable to \$5.00 May Be **FILE NOW:** Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Addition ☐ Change Delete TITLE TITLE BANNERMAN, JAMES NAME NAME **761 MARIANA POINT DRIVE** STREET ADDRESS STREET ADDRESS DAYTONA BEACH FL 32114 CITY-ST-ZIP CITY-ST-7IP Delete ☐ Change ☐ Addition TITLE TITLE MUNS, ARTHUR NAME NAME 535 MARIANA POINT DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAYTONA BEACH FL 32114 ☐ Addition Delete TITLE TITLE HICKEY, FRANK NAME NAME 625 MARIANA POINT DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAYTONA BEACH FL 32114 Addition Delete TITLE REPASKY, ALBERT NAME NAME 714 MARINA POINT DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAYTONA BEACH FL 32114 ☐ Addition Change Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

MICHERED 4/15

904-257-3853

FILED