

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 12, 2004  
Secretary of State**

DOCUMENT# N97000005660

Entity Name: MARINA POINT MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

600 MARINA PT DR  
DAYTONA BEACH, FL 32114

**New Principal Place of Business:**

**Current Mailing Address:**

555 W GRANADA BLVD SUITE G-10  
ORMOND BEACH, FL 32174

**New Mailing Address:**

555 W GRANADA BLVD  
SUITE E-9  
ORMOND BEACH, FL 32174

FEI Number: 59-3495521

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ABBOTT, DALE J  
555 W GRANADA BLVD SUITE G-10  
ORMOND BEACH, FL 32174 US

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

DALE J ABBOTT CPA LLC  
555 W GRANADA BLVD  
SUITE E-9  
ORMOND BEACH, FL 32174 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: DALE J ABBOTT

04/12/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BANNERMAN, JAMES  
Address: 761 MARIANA POINT DRIVE  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D ( ) Delete  
Name: MUNS, ARTHUR  
Address: 535 MARIANA POINT DRIVE  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: T ( ) Delete  
Name: HICKEY, FRANK  
Address: 625 MARIANA POINT DRIVE  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D ( ) Delete  
Name: REPASKY, ALBERT  
Address: 714 MARINA POINT DRIVE  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D ( ) Delete  
Name: ABBOTT, DALE  
Address: 555 W. GRANADA BLVD. E-9  
City-St-Zip: ORMOND BEACH, FL 32174

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DALE J ABBOTT

D

04/12/2004

Electronic Signature of Signing Officer or Director

Date