

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 763221

**Entity Name:** MARINA BAY OF ST. PETERSBURG BEACH CONDOMINIUM ASSOCIATION, INC

**FILED**  
**Apr 08, 2022**  
**Secretary of State**  
**7667601650CC**

**Current Principal Place of Business:**

RESOURCE PROPERTY MGMT  
5901 SUN BLVD. #103  
ST PETERSBURG, FL 33715

**Current Mailing Address:**

RESOURCE PROPERTY MGMT  
5901 SUN BLVD. #103  
ST PETERSBURG, FL 33715 US

**FEI Number: 59-2278466**

**Certificate of Status Desired: No**

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

ZACUR, GRAHAM & COSTIS, PA  
5200 CENTRAL AVENUE  
ST. PETERSBURG, FL 33733 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: RICHARD ZACUR**

**04/08/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name LAFOND, MARTY  
Address 5901 SUN BLVD #103  
City-State-Zip: ST. PETERSBURG FL 33715

Title V.P.  
Name SHAW, ANN  
Address 5901 SUN BLVD #103  
City-State-Zip: ST. PETERSBURG FL 33715

Title TREASURER  
Name KING, CORD  
Address RESOURCE PROPERTY MGMT  
5901 SUN BLVD. #103  
City-State-Zip: ST PETERSBURG FL 33715

Title SECRETARY  
Name AMELIO, JOHN  
Address RESOURCE PROPERTY MGMT  
5901 SUN BLVD. #103  
City-State-Zip: ST PETERSBURG FL 33715

Title DIRECTOR  
Name RICHARDSON, MAC  
Address RESOURCE PROPERTY MGMT  
5901 SUN BLVD. #103  
City-State-Zip: ST PETERSBURG FL 33715

*I hereby 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 all other like empowered.*

**SIGNATURE: MARTY LAFOND**

**PRESIDENT**

**04/08/2022**

Electronic Signature of Signing Officer/Director Detail

Date