

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000010554

**FILED  
Jan 16, 2015  
Secretary of State  
CC5805360421**

**Entity Name:** MARINA SAN PABLO CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

14302 MARINA SAN PABLO PLACE  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

461 A1A BEACH BLVD  
ST. AUGUSTINE, FL 32080

**FEI Number: 20-5773604**

**Certificate of Status Desired: No**

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

SOVEREIGN-JACOBS PROPERTY MANAGEMENT CO  
461 A1A BEACH BLVD  
ST AUGUSTINE, FL 32080 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

**Officer/Director Detail :**

Title DP  
Name GEISLER, MIKE  
Address 461 A1A BEACH BLVD  
City-State-Zip: ST AUGUSTINE FL 32080

Title DVP  
Name CARROLL, JOE  
Address 461 A1A BEACH BLVD  
City-State-Zip: ST AUGUSTINE FL 32080

Title DS, TREASURER  
Name KYLE, BOB  
Address 461 A1A BEACH BLVD  
City-State-Zip: ST AUGUSTINE FL 32080

*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: MIKE GEISLER**

**PRESIDENT**

**01/16/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date