

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000002556

**Entity Name:** ST. MARKS WATERFRONTS FLORIDA PARTNERSHIP, INC.

**Current Principal Place of Business:**

788 PORT LEON DR  
ST MARKS, FL 32355

**Current Mailing Address:**

PO BOX 161  
ST MARKS, FL 32355

**FEI Number:** 27-3365534

**Certificate of Status Desired:** No

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

MCMURRY, CHARLES ESQ  
910 N DUVAL ST  
TALLAHASSEE, FL 32303 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 C  
Name BISHOP, BILLY  
Address PO BOX 161  
City-State-Zip: ST MARKS FL 32355

Title VC  
Name MCNAMARRA, MIKE  
Address 721 PORT LEON DR.  
City-State-Zip: ST MARKS FL 32355

Title TREASURER  
Name GRIMES, DON  
Address PO BOX 66  
City-State-Zip: ST. MARKS FL 32355-0161

*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:** BILLY BISHOP

CHAIRMAN

01/30/2020

Electronic Signature of Signing Officer/Director Detail

Date