

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729992

FILED  
Mar 24, 2010  
Secretary of State

Entity Name: MARINA DEL MAR, INC.

**Current Principal Place of Business:**

C/O ALLIANCE PROPERTY SYSTEMS  
1133 S. UNIVERSITY DR -SUITE 211  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ALLIANCE PROPERTY SYSTEMS  
PO BOX 19439  
PLANTATION, FL 33318

**New Mailing Address:**

FEI Number: 59-1593404

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KAYE & BENDER, P.L.  
1200 PARK CENTRAL BLVD. SOUTH  
POMPANO BEACH, FL 33064 US

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

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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: SEBREE, CHIP  
Address: 1510 SE 15TH STREET #204  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DVP  
Name: MUELLER, JASON A  
Address: 1510 SE 15TH STREET #206  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DT  
Name: GLADD, WILLIAM  
Address: 1510 SE 15TH STREET #110  
City-St-Zip: FT LAUDERDALE, FL 33316

Title: DS  
Name: COHEN, ROSEMARY  
Address: 3700 CLEVELAND STREET  
City-St-Zip: HOLLYWOOD, FL 33021

Title: D  
Name: RINDONE, DIANE  
Address: 1510 SE 15TH STREET #310  
City-St-Zip: FORT LAUDERDALE, FL 33316

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: CHIP SEBREE

DP

03/24/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date