
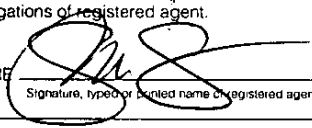



2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90417 048 ****61.25

DOCUMENT # 745442 1. Entity Name MARINA TOWERS AND YACHT CLUB CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 8401 ESTERO BLVD. FT MYERS BEACH, FL 33931-5106			Mailing Address C/O TOP MANAGEMENT 16681 MCGREGOR BLVD #104 FT MYERS, FL 33908 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address PO Box 60847 Suite, Apt. #, etc.		4. FEI Number 59-1630568	
City & State FT Myers FL		City & State FT Myers FL		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 33906		Country USA		6. Name and Address of Current Registered Agent TOP MANAGEMENT OF SW FL INC. 16681 MCGREGOR BLVD SUITE 104 FT MYERS, FL 33908	
7. Name and Address of New Registered Agent Name Shane Spring Street Address (P.O. Box Number is Not Acceptable) Sunset Management Group 12811 Kennwood Ln Suite 210 City FT Myers FL Zip Code 33907		8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  DATE 4/23/07 <small>(NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD JONES, RAY 8401 ESTERO BLVD, STE 607 FT MYERS BCH, FL 33931	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD MAGNVSON, KENNETH 9401 ESTERO BLVD FORT MYERS BEACH, FL 33931	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MAAS, WILLIAM 8401 ESTERO BLVD #506 FT MYERS BCH, FL 33931	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MARKWELL, STEVE 8401 ESTERO BLVD FT MYERS BCH, FL 33931	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP SCHULTZ, RICHARD 8401 ESTERO BLVD #508 FT MYERS BEACH, FL 33531	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			Date 4/23/07 Daytime Phone # 239-333-1141		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					