

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005 8:00 am
Secretary of State

04-26-2005 90127 015 ****61.25

DOCUMENT # 747716

1. Entity Name
**MARINA HARBOUR CONDOMINIUM ASSOCIATION OF
ST. PETERSBURG, INC.**



Principal Place of Business
**3717 46TH AVENUE SOUTH
ST. PETERSBURG, FL 33711**

Mailing Address
**MARINA HARBOUR C/O SHELL REALTY
#102-1110 PINELLAS BAY WAY
TIERRA VERDE, FL 33715 US**



04072005 No Chg-NP

CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2049390

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SHELL REALTY, INC
1110 PINELLAS BAYWAY, STE. 102
TIERRA VERDE, FL 33715**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	EVANS, THELMA
STREET ADDRESS	3717 46TH AVE.S., #11
CITY-ST-ZIP	SAINT PETERSBURG, FL 33711
TITLE	PD
NAME	WILDMAN, FAYE
STREET ADDRESS	3717 46 AVE SO APT 12
CITY-ST-ZIP	SAINT PETERSBURG, FL 33711
TITLE	P
NAME	WILDMAN, FAYE
STREET ADDRESS	3717 46 AVE. SO
CITY-ST-ZIP	SAINT PETERSBURG, FL 33711
TITLE	SD
NAME	WILLIAMS, VALERIE
STREET ADDRESS	3717 46 AVE SO APT. 16
CITY-ST-ZIP	SAINT PETERSBURG, FL 33711
TITLE	TD
NAME	VANHESTER, FRANK
STREET ADDRESS	3717 46 AVE SO APT. 14
CITY-ST-ZIP	SAINT PETERSBURG, FL 33711
TITLE	D
NAME	BRIGGS, STEVE
STREET ADDRESS	4057 48 AVE. SO
CITY-ST-ZIP	SAINT PETERSBURG, FL 33711

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04/19/05 727-966-0154