

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90193 028 ****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**

50017342



04252006 No Chg-NP

CR2E037 (11/05)

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, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VD
EVANS, THELMA
3717 46TH AVE. S., #11
SAINT PETERSBURG, FL 33711**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
WILDMAN, FAYE
3717 46 AVE SO APT 12
SAINT PETERSBURG, FL 33711**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
WILDMAN, FAYE
3717 46 AVE. SO
SAINT PETERSBURG, FL 33711**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
BRIGGS, STEVE
4057 48 AVE. SO
SAINT PETERSBURG, FL 33711**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Faye Wildman *Faye Wildman* 04-25-06