

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752179

FILED
Apr 15, 2009
Secretary of State

Entity Name: MARINA BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1030 U.S. HIGHWAY
OFFICE
N. PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

1030 U.S. HIGHWAY
OFFICE
N. PALM BEACH, FL 33408

New Mailing Address:

FEI Number: 59-2142302

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICKER, EDWARD
ST. JOHN, KING & DICKER
500 AUSTRALIAN AVE., SOUTH, SUITE 600
WEST PALM BEACH, FL 33401 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: P () Delete
Name: SHEEHAN, JAMES M
Address: 12661 148TH ROAD N.
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VP () Delete
Name: RAPF, MICHAEL J
Address: 905 COUNTRY CLUB DRIVE
City-St-Zip: N. PALM BEACH, FL 33408

Title: D () Delete
Name: SORENSEN, GLENN P
Address: 1036 U.S. ONE #324
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: S () Delete
Name: PERKOSKI, SANDRA L
Address: 1030 U.S. ONE #307
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: T () Delete
Name: CISCLE, JAMIE
Address: 1036 U.S. ONE #226
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: IVERSEN, KNUT P
Address: 1030 U.S. ONE #407
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SANDRA L. PERKOSKI

S

04/15/2009

Electronic Signature of Signing Officer or Director

Date