2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754054

FILED Jan 09, 2009 Secretary of State

Entity Name: MARBEYA CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1100 SEMORAN BLVD CASSELBERRY, FL 32707 LIS **Current Mailing Address: New Mailing Address:** 1100 SEMORAN BLVD CASSELBERRY, FL 32707 US FEI Number: 59-2031256 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DIANA P. SECOR 1100 SEMORAN BLVD. CASSELBERRY, FL 32707 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete KELLER, BRENDA Name: Name: 105 RIVER OAKS CIR Address: Address: SANFORD, FL 32771 City-St-Zip: City-St-Zip: Title: PD () Delete Title: () Change () Addition MCDADE, SANDRA Name: Name: Address: 1158C-CALLE DE NORTE Address: City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: Title: () Delete Title: VPD (X) Change () Addition SCHILL, RUSSELL ESMOND, DENNY Name: Name: 1162 B PASEO DEL MAR Address: Address: 1152C PASEO DEL SOL City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: CASSELBERRY, FL 32707 Title: VD () Delete Title: SD (X) Change () Addition HARPER, PATRICIA Name: Name: ALFORD, JACK 1179B PASEO DEL MAR Address: 11660 PASEO DELAS FLORES Address: City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: CASSELBERRY, FL 32707 Title: Title: () Delete () Change () Addition KANE, MARY JANE Name: Name: 1160-C CALLE DEL NORTE Address: Address: City-St-Zip: CASSELBERRY, FL 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: DIANA SECOR AGEN 01/09/2009