FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 11:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **758540** **(9)**

1. Corporation Name

MARINA VILLAS AT BLUEWATER BAY CONDOMINIUM ASSOC IATION, INC.

Principal Place of Business	Mailing Address
1950 BLUEWATER BLVD PO BOX 247 NICEVILLE FL 32588-6981	1950 BLUEWATER BLVD PO BOX 247 NICEVILLE FL 32588-6981

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/27/1981
3a. Date of Last Report: 05/01/1994
4. FEI Number: 58-1485786 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 1950 Bluewater Blvd.	26 1950 Bluewater Blvd.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Niceville, FL	City & State 28 Niceville, FL
Zip / Country 24 32578 / 25 Okaloosa	Zip / Country 29 32578 / 30 Okaloosa

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — **$68.75** Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WEAVER, DAVID C
4400 HWY 20 E #304
NICEVILLE FL 32578

10. Name and Address of New Registered Agent

81 Name: Norbert Melnick
82 Street Address (P.O. Box Number is Not Acceptable)
83: 708 Sunningdale Cove
84 City: Niceville **FL** 85 Zip Code: 32578

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: D W Weaver Jr. — 4/27/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when mandatory) — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE		☐ Change ☐ Addition
NAME	KNAPP, JUERGEN	12 NAME		
STREET ADDRESS	1950 BLUEWATER BLVD.	13 STREET ADDRESS		
CITY-ST-ZIP	NICEVILLE FL	14 CITY-ST-ZIP		
TITLE	~~VD~~	21 TITLE	VD	☒ Change ☐ Addition
NAME	~~PHILLIPS, FRANK J~~	22 NAME	Norbert Melnick	
STREET ADDRESS	~~300 BAY DR #5~~	23 STREET ADDRESS	708 Sunningdale Cove	
CITY-ST-ZIP	~~NICEVILLE FL~~	24 CITY-ST-ZIP	Niceville, FL 32578	
TITLE	STD	31 TITLE		☐ Change ☐ Addition
NAME	ZAHN, PETER	32 NAME		
STREET ADDRESS	1950 BLUEWATER BLVD.	33 STREET ADDRESS		
CITY-ST-ZIP	NICEVILLE, FL 00000	34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: D W Weaver Jr. — 4/27/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0021665