

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2002 8:00 am
Secretary of State

05-23-2002 90105 013 ****61.25

DOCUMENT # 758540

1. Entity Name

**MARINA VILLAS AT BLUEWATER BAY CONDOMINIUM ASSOC
 IATION, INC.**

Principal Place of Business

Mailing Address

**4400 HWY 20E SUITE 313
 NICEVILLE FL 32578
 US**

**PO BOX 5263
 NICEVILLE FL 32578
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

58-1485786

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MELNICK, NORBERT
 708 SUNNINGDALE COVE
 NICEVILLE FL 32578**

Name

DARLANE LANDSBERGER

Street Address (P.O. Box Number is Not Acceptable)

4400 HWY. 20 E. SUITE 313

City

NICEVILLE

FL

Zip Code

32578

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

APR 26 2007

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Delete
 NAME **CARNAZZA, VINCENT**
 STREET ADDRESS **114 RAINBOW AVE**
 CITY-ST-ZIP **FT BENNING GA 31905**

TITLE **V/D** ☐ Change ☒ Addition
 NAME **WERNER, THOMAS**
 STREET ADDRESS **1027 W. CHOCTAWHATCHEE**
 CITY-ST-ZIP **NICEVILLE, FL 32578**

TITLE **D** ☐ Delete
 NAME **MELNICK, NORBERT**
 STREET ADDRESS **708 SUNNINGDALE COVE**
 CITY-ST-ZIP **NICEVILLE FL 32578**

TITLE **P/D** ☒ Change ☐ Addition
 NAME **MELNICK, NORBERT**
 STREET ADDRESS **708 SUNNINGDALE COVE**
 CITY-ST-ZIP **NICEVILLE, FL 32578**

TITLE **D** ☒ Delete
 NAME **MAYERCIK, MICHAEL**
 STREET ADDRESS **300 YACHT CLUB DRIVE #15**
 CITY-ST-ZIP **NICEVILLE FL 32578**

TITLE **S/T/D** ☐ Change ☒ Addition
 NAME **CARNAZZA, VINCE**
 STREET ADDRESS **408 DICKMAN ROAD**
 CITY-ST-ZIP **FT. SAN HOUSTON, TX 78234**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

Norbert Melnick
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR 30 2002

Date

Daytime Phone #

897-3190

CR2E037 (9/01)