FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # 761270

(8)

MARINATOWN VILLAGE, A CONDOMINIUM ASSOCIATION, I NC.

Principal Place of Business 12734-92 KENWOOD LANE FT MYERS FL 33907

Mailing Address

12734-32 KENWOOD LANE FT MYERS FL 33907-5634

FILED May 14 1997 8:00am Secretary of State



						12/30/1981 Use incorporated of Gualined 3a. Date of Last Report 05/01/1996
C\O Marquis Management, Inc. 12661 New Brittany Blvd. Fort Myers, Fl. 33907 C\O Marquis Management 12661 New Brittany Blvd Fort Myers, Fl. 33907						4. FEI Number Applied For 59-2393150 Not Applied
						5. Certificate of Status Desired See Required Fee Required
						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
24	25	29	30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
	9. Name and Address of Cur	rrent Hegistered Agen	<u> </u>	81	Nan C	10. Name and Address of New Registered Agent
MICHAEL FLEMING & ASSOCIATES 12734-32 KENWOOD LANE FT MYERS FL 33907				81 Nan Stilphen, Peter 82 Stre Marquis Management, Inc. 83 12661 New Brittany Blvd. Fort Myers, Fl. 33907 84 City Fort Myers, Fl. 33907		
11. Pürsuant office or i agent. I s SIGNATURE	im familiar with, and accept the ob-	oligations of, Section 61 PCTER	ange was aund 17.0503, Florida 	Statute:	7 the corp s. T	corporation submits this statement for the purpose of oranging its registered poration's board of directors. I hereby accept the appointment as registered
12.	Signature, typed or printed name of registered	AND DIRECTORS	(NOTE: Reg	stered Age	ent signature	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VPD		DELETE	1.1 TITLE		D Change X Addit
NAME	RUSS, DALE	44		1.2 NAME		Krizka, Catherina
STREET ADDRESS	1804 KING LAKE BLVD #1	102		1.3 STREET	ANORESS	1051 Palm Ave.
CITY-ST-ZIP	NAPLES FL	100		1.4 CITY - S		No. Ft. Myers, FL 33903
TITLE	DP		DELETE	2.1 TITLE	II En	Change Addit
NAME	THEET, JIM			2.2 NAME		,
STREET ADDRESS	1055 PALM AVE #215			2.3 STREET	ADDRESS	
CITY-ST-ZIP	N FT MYERS FL			2.4 CITY-		
TITLE	STD		DELETE	3.1 TITLE		☐ Change ☐ Addit
NAME	COKEL CINDY			3.2 NAME		
STREET ADDRESS	1051 PALM AVE #127			3.3 STREET	ADDRESS	
CITY-ST-ZIP	N FT MYERS FL			3.4. CITY-	ST- 7 IP	
TITLE			DELETE	4.1 TITLE		Change Addit
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET	ADDRESS	
CITY-ST-ZIP				4.4 CITY - S	T-ZiP	
TITLE			DELETE	51 TITLE		☐ Change ☐ Addit
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREET	ADDRESS	
CITY-ST-ZIP				5.4 CITY-S		
TITLE				61 TITLE		☐ Chánge ☐ Addit
NAME				62 NAME		
STREET ADDRESS				69 STREET	ADDRESS	
CITY-ST-ZIP			1	64 CITY-S		
	by certify that the information supp	ofied with this filing doe	s not qualify for	the exe	mption s	stated in Section 119.07(3)(i), 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 eath; 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.