2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#761328

FILED Jan 12, 2006 Secretary of State

Entity Name: MARINA VILLAGE AT SNUG HARBOR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:					New Principal Place of Business:				
645 SAN CARLOS BLVD FT MYERS BEACH, FL 33931 US									
Current Mailing Address:					New Mailing Address:				
PO BOX 2430 FT MYERS BEACH, FL 339322430 US									
FEI Number:	59-2471200	FEI Number Appl	ied For()	FEI Number Not A	pplicable ()	Certificate of	f Status Desired	()	
Name and	Address of Cu	urrent Register	ed Agent:	Name a	nd Address of	New Registe	ered Agent:		
201 PRIMC FORT MYE	ERS BEACH, FI	L 33931 US	mont for the pure	rnoso of changin	a its registered	office or regis	storod agent o	r both	
	of Florida.	מטוווונא נוווא אנמנפו	ment for the pur	ipose of changin	g its registered	office of regis	stered agent, o	i botii,	
SIGNATUR	RE:								
Electronic Signature of Registered Agent					Date				
OFFICERS AND DIRECTORS:				ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	RULAND, NICHO 938 PRESCOTT	Delete DLAS EACH, FL 33931		Title: Name: Address: City-St-Zi _l		() Change () A	ddition		
Title: Name: Address: City-St-Zip:	D () I BURKE, MARTIN 263 NE BAYVIEV LEES SUMMIT, N	W DRIVE		Title: Name: Address: City-St-Zip		() Change () A	ddition		
Title: Name: Address: City-St-Zip:	KETCHMARK, M 201 PRIMO	Delete ICHAEL EACH, FL 33931		Title: Name: Address: City-St-Zi _l		() Change () A	ddition		
Title: Name: Address: City-St-Zip:	D () I ROSEN, PAUL A 12432 ELLOITT SEBASTOPOL, G	LANE		Title: Name: Address: City-St-Zip	ROSEN, PAU 215 VIRGINIA	A AVENUE	ddition		
Title: Name: Address: City-St-Zip:	DP () I PINKSTON, CHA 163 JUNIPER DE VERSAILLES, K	₹		Title: Name: Address: City-St-Zip		()Change ()A	ddition		

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL KETCHMARK DST 01/12/2006