2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#761913

Current Principal Place of Business:

FILED Feb 04, 2009 Secretary of State

Entity Name: SAN MARCO SQUARE CONDOMINIUM ASSOCIATION, INC.

Electronic Signature of Registered Agent

C/O BERRY & GREUSEL 1104 NORTH COLLIER BLVD. MARCO ISLAND, FL 34145 US	C/O JAMIE B. GREUSEL 1104 NORTH COLLIER BLVD. MARCO ISLAND, FL 34145 US
Current Mailing Address:	New Mailing Address:
C/O BERRY & GREUSEL 1104 NORTH COLLIER BLVD. MARCO ISLAND, FL 34145 US	C/O JAMIE B. GREUSEL 1104 NORTH COLLIER BLVD. MARCO ISLAND, FL 34145 US
FEI Number: 59-2393436 FEI Number Applied For () FEI Number	mber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
GRUSEL, JAMIE B 1104 NORTH COLLIER BLVD. MARCO ISLAND, FL 34145 US	GREUSEL, JAMIE B 1104 NORTH COLLIER BLVD. MARCO ISLAND, FL 34145 US
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,	

New Principal Place of Business:

OFFICERS AND DIRECTORS:

SIGNATURE: JAMIE B. GREUSEL

in the State of Florida.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

02/04/2009

Date

() Delete (X) Change () Addition GREUSEL, JAMIE B GREUSEL, JAMIE B Name: Name: Address: 1104 NO COLLIER BLVE Address: 1104 NO COLLIER BLVE City-St-Zip: MARCO ISLD, FL City-St-Zip: MARCO ISLD, FL Title: PD () Delete Title: () Change () Addition AYASUN, TARIK N Name: Name: Address: 160 LEEWARD COURT Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: Title: () Delete Title: () Change () Addition GIBSON, JIM Name: Name: 1281 6TH AVE. Address: Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: () Delete Title: Title: () Change (X) Addition Name: Name: MCGUFFIE, AXEL 1129 NORTH COLLIER BLVD. Address: Address: City-St-Zip: City-St-Zip: MARCO ISLAND, FL 34145

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: JAMIE B. GREUSEL D 02/04/2009