FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998

DOCUMENT # 766127 (5)

THE MARINA CLUB OF TAMPA CONDOMINIUM ASSOCIATION , INC.

Principal Place of Business

Mailing Address

2424 W. TAMPA BAY BLVD. TAMPA FL 33604

Sulte, Apt. #, etc.

City & State

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824 E. FLETCHER AVE. TAMPA FL 33612

City & State

3. Date Incorporated or Qualified 12/14/1982

4. FEI Number 59-2396372

5. Certificate of Status Desired

6. Election Campaign Financing

Not Applicable \$8.75 Additional Fee Required

\$5.00 May Be

Applied For

2a. Malling Address 2. Principal Place of Business

Country

25

Added to Fees Trust Fund Contribution 7. Is this nonprofit corporation a homeowners association? Yes

10. Name and Address of New Registered Agent

8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30.

FILED

Feb 19 1998 8:00am

Secretary of State

9. Name and Address of Current Registered Agent

LERNER, PATRICIA **420 WEST PLATT STREET TAMPA FL 33607**

81	Name
82	Street Address (P.O. Box Number Is Not Acceptable)

63

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

Signature: Noed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating).								
12.	Signature, typed or printed name of registered agent and title if appl OFFICERS AND DIRECTOR		13.	ADDITIONS/CHANGES TO OFFIC		12		
TITLE	PD OFFICERS AND BIREGION	DELETE	1.1 TITLE	VP		Addition		
NAME	WALVOORD, KATHY		1.2 NAME	• 1	· · · -			
STREET ADDRESS	2424 W. TAMPA BAY BLVD. #206-B		1.3 STREET ADDRESS					
CITY-ST-ZIP	TAMPA FL 33607		1.4 CITY-ST-ZIP			_		
TITLE	\$D	DELETE	2.1 TIYLE	PP.	☐ Change 🔽	Addition		
NAME	PAYNE, PAUL		2.2 NAME	wilson, michael				
STREET ADDRESS	2424 W. TAMPA BAY BLVD. #207-B		2.3 STREET ADDRESS	Wilson, michael 2424 W TAMPA C	say 13/14 Hb	102		
CITY-ST-ZIP	TAMPA FL 33607	_	2. 4 CITY-ST-ZIP	TAMBA FI	•			
TITLE	10	DELETÉ	3.1 TITLE		☐ Change 🗹	Addition		
NAME	B RUWZZI, JAMES		3.2 NAME	SPTRENKLE SUSF 2424 WTAMPAR	1N 21 1 4 2			
STREET ADDRESS	2424 W. TAMPA BAY BLVD. #212-B		3.3 STREET ADDRESS	12424 M. 177mpa K	say piva 4 0	US		
CITY-ST-ZIP	TAMPA FL 33607		3.4. CITY-ST-ZIP	TAMPA, FI				
TITLE	VPD	☐ DELETE	4.1 TITLE	TP	Change 🔲	Addition		
NAME	\$ CHLENKERD, JOHN		4. 2 NAME					
STREET ADDRESS	2424 W. TAMPA BLVD., #1010		4.3 STREET ADDRESS					
CITY-ST-ZIP	TAMPA FL 33607		4.4 CITY-ST-ZIP					
TITLE	D	☐ DELETÉ	5.1 TITLE		∐ Change ∐	Addition		
NAME	MARTIN, ANTHONY		5.2 NAME					
STREET ADDRESS	2424 W. TAMPA BAY BLVD. #10813		5.3 STREET ADDRESS					
CITY-ST-ZIP	TAMPA FL 33607		5.4 CITY - ST - ZIP			5 5 550		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐	Addition		
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					

6.4 CITY-ST-ZIP 14. 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 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.

211.08