

2004 NOT-FOR-PROFIT CORPORATION # ANNUAL REPORT (AR)

FILED
Apr 09, 2004 8:00 am
Secretary of State

04-09-2004 90079 011 ****61.25

DOCUMENT # 766127

1. Entity Name

**THE MARINA CLUB OF TAMPA CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business

**2424 W TAMPA BAY BLVD
D-106
TAMPA FL 33607
US**

Mailing Address

**2880 SCHERER DR
STE. 840
ST. PETERSBURG FL 33716
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

59-2396372

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

**KASS, SHULER, SOLOMON, SPECTOR, FOYLE & SINGER
C/O RON COTTERILL
1505 N. FLORIDA
TAMPA FL 33716**

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME MOORE, GAIL ☐ Delete
STREET ADDRESS 2424 W. TAMPA BAY BLVD. B-207
CITY-ST-ZIP TAMPA FL 33607

TITLE VPD ☒ Change ☐ Addition
NAME MIRA, PATTY
STREET ADDRESS 2424 W. TAMPA BAY BLVD D202
CITY-ST-ZIP TAMPA, FL 33607

TITLE VD ☒ Delete
NAME PIMM, DENNIS
STREET ADDRESS 2424 W. TAMPA BAY BLVD #A-111
CITY-ST-ZIP TAMPA FL 33607

TITLE D ☐ Change ☒ Addition
NAME DE MARINIS
STREET ADDRESS 2424 W. TAMPA BAY BLVD. F203
CITY-ST-ZIP TAMPA, FL 33607

TITLE SD ☒ Delete
NAME TROTT, KATHY
STREET ADDRESS 2424 W. TAMPA BAY BLVD #A-111
CITY-ST-ZIP TAMPA FL 33607

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

TITLE TD ☐ Delete
NAME BLAIR, BRIAN
STREET ADDRESS 2424 W. TAMPA BAY BLVD I-201
CITY-ST-ZIP TAMPA FL 33607

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

TITLE D ☒ Delete
NAME MIRA, PATTY
STREET ADDRESS 2424 W. TAMPA BAY BLVD. #D-202
CITY-ST-ZIP TAMPA FL 33607

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

TITLE ☐ Delete
NAME
STREET ADDRESS
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:

Gail Moore 4-1-04 **GAIL MOORE
PRESIDENT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

813-876-3005