

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 27 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 766128 (3)

1. Corporation Name

THE MARINA CLUB OF TAMPA HOMEOWNERS' ASSOCIATION
, INC.

Principal Place of Business

824 E. FLETCHER AVENUE
TAMPA FL 33612

Mailing Address

824 E. FLETCHER AVENUE
TAMPA FL 33612



3. Date Incorporated or Qualified

12/14/1982

4. FEI Number

59-2396362

Applied For

Not Applicable

2. Principal Place of Business

21 7001 Temple Terrace Hwy.

Suite, Apt. #, etc.

22 City & State
Temple Terrace, FL

23 Zip
33637

Country

24

2a. Mailing Address

26 7001 Temple Terrace Hwy.

Suite, Apt. #, etc.

27 City & State
Temple Terrace, FL

28 Zip
33637

Country

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☒ Yes

☐ No

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

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

LERNER, PATRICIA
420 WEST PLATT STREET
TAMPA FL 33608

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME WALVOORD, KATHY
STREET ADDRESS 2424 W. TAMPA BAY BLVD., UNIT B-206
CITY-ST-ZIP TAMPA FL

TITLE SD ☐ DELETE

NAME SCHOELLES, CHRIS
STREET ADDRESS 2424 W. TAMPA BAY BLVD., UNIT M-402
CITY-ST-ZIP TAMPA FL

TITLE SD ☐ DELETE

NAME PAYNE, PAUL
STREET ADDRESS 2424 W. TAMPA BAY BLVD., UNIT B-207
CITY-ST-ZIP TAMPA FL

TITLE TD ☐ DELETE

NAME BRUNOZZI, JAMES
STREET ADDRESS 2424 W. TAMPA BAY BLVD., UNIT B-104
CITY-ST-ZIP TAMPA FL

TITLE D ☐ DELETE

NAME MARTIN, ANTHONY
STREET ADDRESS 2424 W. TAMPA BAY BLVD., UNIT B-108
CITY-ST-ZIP TAMPA FL

TITLE D ☐ DELETE

NAME GERHART, KATHY
STREET ADDRESS 2424 W. TAMPA BAY BLVD., UNIT K-203
CITY-ST-ZIP TAMPA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VPD ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE PD ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

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 registered 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.

SIGNATURE:

2-20-98

980-1000

CP2E037 (10/97)