2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2009
Secretary of State

DOCUMENT# 768570

Entity Name: MARINA BAY TOWNHOMES ASSOCIATION, INC.

Current Principal Place of Business:

130 MARINA BAY DR
NEW SMYRNA BEACH, FL 321692319 US

New Principal Place of Business:

Current Mailing Address:

MARINA BAY TOWNHMES HOA
130 MARINA BAY DR.
NEW SMYRNA BEACH, FL 321692319 US

New Mailing Address:

FEI Number: 59-2964990 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EARL, PATRICIA
133 MARINA BAY DR.
NEW SMYRNA BEACH, FL 32169 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: EARL, GARY
Address: 133 MARINA BAY DR.
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VD ( ) Delete
Name: LINDBERG, TOM
Address: 152 MARINA BAY DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: STD ( ) Delete
Name: HAWK, MARGARET
Address: 156 MARINA BAY DR.
City-St-Zip: NEW SMYRNA BEACH, FL 32169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change ( ) Addition
Name: KRISTIANSEN, MAUREEN
Address: 148 MARINA BAY DR.
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: GARY EARL PD 02/09/2009

Electronic Signature of Signing Officer or Director — Date