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FILED  
May 13 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 768916 (9)  
1. Corporation Name

MARINA BAY HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address  
P.O. BOX 1101 WINDERMERE FL 34786 P.O. BOX 1101 WINDERMERE FL 34786-1101

3. Date Incorporated or Qualified 06/14/1983 3a. Date of Last Report 04/15/1996  
4. FEI Number 59-2895147 Applied For Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

9. Name and Address of Current Registered Agent  
SLONECKER, MICHAEL L.  
11044 SCHOONER WAY  
WINDERMERE FL 32786

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
TITLE PD  DELETE  
NAME ROBERT SMITH  
STREET ADDRESS 2222 WHALER WAY  
CITY-ST-ZIP WINDERMERE FL  
TITLE VPD  DELETE  
NAME JOHN GRISWOLD  
STREET ADDRESS 11037 CLIPPER COURT  
CITY-ST-ZIP WINDERMERE FL  
TITLE STD  DELETE  
NAME PETER FIDE  
STREET ADDRESS 11047 CLIPPER COURT  
CITY-ST-ZIP WINDERMERE FL  
TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE PD  Change  Addition  
1.2 NAME PETER FIDES  
1.3 STREET ADDRESS 11047 CLIPPER COURT  
1.4 CITY-ST-ZIP WINDERMERE, FL 34786  
2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE STD  Change  Addition  
3.2 NAME BILL ZITON  
3.3 STREET ADDRESS 11040 CLIPPER COURT  
3.4 CITY-ST-ZIP WINDERMERE, FL 34786  
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 do 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, changed, or on an Attachment with an address.

SIGNATURE: *Peter Fides* PETER FIDES, PRESIDENT 4/24/97 (407) 418-2402

CR2E037 (9/96)