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NONPROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 769665

1. Corporation Name

MARINA GARDENS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

7731 BOCILLA LANE
 P. O. BOX 477
 BOKEELIA FL 33922-4770

Mailing Address

7731 BOCILLA LANE
 P. O. BOX 477
 BOKEELIA FL 33922-4770



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

21

26

08/02/1983

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

Applied For

22

27

59-2746151

Not Applicable

City & State

City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23

28

Zip Country

Zip Country

6. Election Campaign Financing

\$5.00 May Be Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HEDLUND, ROBERT V
 7731 BOCILLA LANE UNIT 13
 BOKEELIA FL 33922

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE STD DELETE
 NAME HEDLUND, ROBERT V.
 STREET ADDRESS 7731 BOCILLA LANE, #13
 CITY-ST-ZIP BOKEELIA FL

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

TITLE D DELETE
 NAME CLARK, CHARLES V.
 STREET ADDRESS 7731 BOCILLA LANE, #11
 CITY-ST-ZIP BOKEELIA FL

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

TITLE PD DELETE
 NAME BAILEY, STEVEN
 STREET ADDRESS 1131 30TH ST #6
 CITY-ST-ZIP BIRMINGHAM AL

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE VD DELETE
 NAME WEINTRAUB, RUSSELL
 STREET ADDRESS 178 DAVIS ST
 CITY-ST-ZIP BRADFORD PA

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 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 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, with all other like empowered.

SIGNATURE:

Handwritten Signature
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-23-99 941-433-112
 Date Daytime Phone #

CR2E037 (1/98)