

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2001 8:00 am
Secretary of State

02-08-2001 90045 030 ***150.00

DOCUMENT # G40705

1. Entity Name

MARINA ISLES DEVELOPMENT CORP.

Principal Place of Business

**409 PALM SPRINGS BLVD
INDIAN HARBOUR BEACH FL 32937
US**

Mailing Address

**409 PALM SPRINGS BLVD
SATELLITE BEACH FL 32937
US**

2. Principal Place of Business

1692 W. Hibiscus Blvd.
Suite, Apt. #, etc.

3. Mailing Address

1692 W. Hibiscus Blvd.
Suite, Apt. #, etc.

City & State

Melbourne, Fla.

City & State

Melbourne, FL

Zip

32901

Country

Brevard

Zip

32901

Country

Brevard

4. FEI Number

59-2293188

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**NORMILE, JR H C
1499 SO HARBOR CITY BLVD
SUITE 303
MELBOURNE FL 32901**

7. Name and Address of New Registered Agent

Name **Kenneth A. Whittaker**
Street Address (P.O. Box Number is Not Acceptable)
1692 W. Hibiscus Blvd.
City **Melbourne** FL Zip Code **32901**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2-1-01

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

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

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **MCGUIRE, VERONICA**
STREET ADDRESS **10 MARINA ISLES BLVD**
CITY-ST-ZIP **INDIAN HARBOUR BH FL 32937**

TITLE **PTD** ☒ Delete
NAME **PERSON, ARTHUR B.**
STREET ADDRESS **1406 SO RIVERSIDE DR**
CITY-ST-ZIP **INDIATLANTIC FL 32903**

TITLE **TD** ☒ Delete
NAME **POORBAUGH, STEVEN L**
STREET ADDRESS **333 NAUTICA CT**
CITY-ST-ZIP **INDIAN HARBOUR BCH FL 32937**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Veronica M McGuire**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(321) 723-3352

Daytime Phone #

CR2E034 (10/00)