

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001128

FILED
Apr 28, 2009
Secretary of State

Entity Name: MARINA BAY NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

GRS MANAGEMENT ASSOCIATES, INC
3900 WOODLAKE BLVD STE 309
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

GRS MANAGEMENT ASSOCIATES, INC
3900 WOODLAKE BLVD STE 309
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 65-1088222

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINE, JAY S
3300 PGA BLVD. STE 970
PALM BEACH GARDENS, FL 33410 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: VP (X) Delete
Name: WINTERFELDT, BOB
Address: 11882 OSPREY POINTE CIRCLE
City-St-Zip: WELLINGTON, FL 33467

Title: PD () Delete
Name: GREENFIELD, ALAN
Address: 11811 OSPREY POINTE CIRCLE
City-St-Zip: WELLINGTON, FL 33467

Title: TSD () Delete
Name: CHALHUB, MICHAEL
Address: 11831 OSPREY POINTE CIRCLE
City-St-Zip: WELLINGTON, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P VP (X) Change () Addition
Name: GREENFIELD, ALAN
Address: 11811 OSPREY POINTE CIRCLE
City-St-Zip: WELLINGTON, FL 33467

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

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: ALAN GREENFIELD

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date