2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2003 8:00 am
Secretary of State
03-27-2003 90096 007 ****61.25

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DOCUMENT # N00000003195

1. Entity Name

MARINA BAY-FLAGLER CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
% P.O. BOX 351471 PALM COAST FL 32135-1471	% P.O. BOX 351471 PALM COAST FL 32135-1471

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3651589 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MARKS, ANNIE 5455 AIA SOUTH ST. AUGUSTINE FL 32080	Name: Fred Annon, Jr./Palm Coast Property Management Co Street Address (P.O. Box Number is Not Acceptable): 7 Florida Park Dr., Suite C City: Palm Coast, Fl. FL Zip Code: 32137

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ 03/07/2003
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE
FRED ANNON, JR.

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BASS, LYNNE 5655 BARNA AVENUE TITUSVILLE FL 32780	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SHEAFFER, WILLIAM J 609 EAST CENTRAL BLVD. ORLANDO FL 32801	XX Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SHEAFFER,CAROL 609 East Central Blvd. Orlando, Fl. 32801	☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S FRAZIER, JOHN 4336 OTTER COURT FERNANDINA BEACH FL 32034	XX Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NIX,WILLARD 6334 Green Grove Ct. Orlando, Fl. 32819	☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MERRITT, SIMONE M 300 MARINA BAY DRIVE, #201 FLAGLER BEACH FL 32136	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/T/D MERRITT, SIMONE 300 Marina Bay Dr., Unit#201 Flagler Beach, Fl. 32136	XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MASON, STEVEN G 1643 HILCREST STREET ORLANDO FL 32803	XX Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Simone Merritt (Simone Merritt) 3/11/03 (386) 439-2385