

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

FILED
Jan 16, 2003 8:00 am
Secretary of State

01-16-2003 90075 008 ****61.25

DOCUMENT # N00000003931

1. Entity Name

MARBELLA OF ANNA MARIA ISLAND CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**1900 GULF DRIVE NORTH
BRADENTON BEACH FL 34217**

Mailing Address

**1900 GULF DRIVE NORTH
BRADENTON BEACH FL 34217**

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 **65-1014938**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**BISHOP, GERALD
2831 RINGLING BLVD
#218F
SARASOTA FL 34237**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TOUCHTON, JOHN R 74 RYANN NICOLE COURT WINTER HAVEN FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD WILLIS, LINDA 4019 89TH STREET EAST PALMETTO FL 34221	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSSITER, LEO 909 MCINTOSH DRIVE BRANDON FL 33510	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALKER, KAREN 2100 DYNAMITE ROAD BARTOW FL 33830	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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: REQUIRED

1-14-03

941-778-5945

CR2E037 (10/02)