

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008416

FILED
Apr 29, 2009
Secretary of State

Entity Name: MARINA VILLAGE OF PANACEA UNIT II TOWNHOUSE ASSOCIATION, INC.

Current Principal Place of Business:

C/O RICHARD E BENTON
1415 EAST PIEDMONT DR STE 4
TALLAHASSEE, FL 32308

New Principal Place of Business:

695 MASHES SANDS ROAD
PANACEA, FL 32346

Current Mailing Address:

C/O RICHARD E BENTON
1415 EAST PIEDMONT DR STE 4
TALLAHASSEE, FL 32308

New Mailing Address:

PO BOX 1390
PANACEA, FL 32346

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BENTON, RICHARD E
1415 EAST PIEDMONT DR STE 4
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

HARRIS, H. CLAY III
64 BLUE HERON WAY
PANACEA, FL 32346 US

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: H. CLAY HARRIS, III

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HARRIS, CLAY
Address: P.O.BOX 1390
City-St-Zip: PANACEA, FL 32346

Title: STD () Delete
Name: HARRIS, LINDA
Address: P.O.BOX 1390
City-St-Zip: PANACEA, FL 32346

Title: D () Delete
Name: CUDA, FRANK
Address: 46 BLUE CRAB LANE
City-St-Zip: PANACEA, FL 32346

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: CLAY HARRIS

PD

04/29/2009

Electronic Signature of Signing Officer or Director

Date