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

DOCUMENT # N02000008416

Country

1. Entity Name

MARINA VILLAGE OF PANACEA UNIT II TOWNHOUSE ASSOCIATION, INC.

Principal Place of Business							
C/O RICHARD E BENTON							
1415 EAST PIEDMONT DR STE 4 TALLAHASSEE FL 32308							

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

Zip

Mailing Address

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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

Sep 16, 2003 8:00 am Secretary of State

05-07-2003 90431 001 ***300.00

09-16-2003 90005 023 ****61.25

☐ CHECK HERE IF MAKING CHANGES

Applied For Not Applicable

\$8.75 Additional

4. FEI Number

5. Certificate of Status Desired

S. Name and Address of Current Begintered Agent				7 Name and Address of Name Designation of State				
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name				
BENTON, RICHARD E 1415 EAST PIEDMONT DR STE 4 TALLAHASSEE FL 32308				Street Address (P.O. Box Number is Not Acceptable)				
						FL Zip Cod	e	
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. † 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				ure required when reinstating)	, Di	ATE.		
FILE NOW: FEE IS \$61.25 After September 10, 2003, min will be \$236.25		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/CHA	L NGES TO OFFICERS ANI	D DIRECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HARRIS, CLAY P.O.BOX 1390 PANACEA FL 32346	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		•	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD HARRIS, LINDA P.O.BOX 1390 PANACEA FL-32346	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP=			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CUDA, FRANK P.O.BOX 1390 PANACEA FL 32346	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	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.								

Country