2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2009
Secretary of State

DOCUMENT# N03000002431

Entity Name: ESTUARY MARINA ASSOCIATION, INC.

Current Principal Place of Business:

2417 S.E. DIXIE HIGHWAY
STUART, FL 33496

New Principal Place of Business:

Current Mailing Address:

2417 S.E. DIXIE HIGHWAY
STUART, FL 33496

New Mailing Address:

FEI Number: 42-1600645 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TREASURE COAST PROPERTY MANAGEMENT
2417 S.E. DIXIE HIGHWAY
STUART, FL 33496 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: VD ( ) Delete
Name: WINTERS, JIM
Address: 2417 S.E. DIXIE HIGHWAY
City-St-Zip: STUART, FL 33496

Title: DP ( ) Delete
Name: MASKIELL, WAYNE
Address: 2417 S.E. DIXIE HIGHWAY
City-St-Zip: STUART, FL 33496

Title: TD ( ) Delete
Name: PRUITT, JAMES
Address: 2417 S.E. DIXIE HIGHWAY
City-St-Zip: STUART, FL 33496

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change ( ) Addition
Name: WINTERS, JIM
Address: 2417 S.E. DIXIE HIGHWAY
City-St-Zip: STUART, FL 33496

Title: VP (X) Change ( ) Addition
Name: MASKIELL, WAYNE
Address: 2417 S.E. DIXIE HIGHWAY
City-St-Zip: STUART, FL 33496

Title: P (X) Change ( ) Addition
Name: CONIGLIARO, CHARLES
Address: 2417 S.E. DIXIE HIGHWAY
City-St-Zip: STUART, FL 33496

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: CHARLES CONIGLIARO P 03/09/2009

Electronic Signature of Signing Officer or Director — Date