# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000009979

Apr 27, 2007 Secretary of State

Entity Name: THE VILLAGE AT MARINA COVE OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

209 7TH STREET 224 7TH STREET

PORT ST JOE, FL 32456 PORT ST JOE, FL 32456

**Current Mailing Address: New Mailing Address:** 

209 7TH STREET 224 7TH STREET

PORT ST JOE, FL 32456 PORT ST JOE, FL 32456

FEI Number: 20-0746069 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GROOM, PAUL WII 116 SAILORS COVE DR PORT ST JOE, FL 32456

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:

Date

### Electronic Signature of Registered Agent

US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

#### **OFFICERS AND DIRECTORS:**

(X) Change ( ) Addition

( ) Delete DP RISH, WILLIAM J JR RISH, WILLIAM J JR Name: Name: P O BOX 428 Address: 252 MARINA DRIVE Address: PORT ST JOE, FL 32456 City-St-Zip: PORT ST JOE, FL 32456 City-St-Zip:

Title: DVST Title: ( ) Delete () Change () Addition

RISH, RALPH P Name: Name: Address: 450 BLAKE DR Address: City-St-Zip: WEWAHITCHKA, FL 32465 City-St-Zip:

Title: DVST () Delete Title: () Change () Addition

PREBLE, GREGORY S Name: Name: 6631 NE PISGAH CURCH RD Address: Address: City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip:

(X) Change ( ) Addition Title: D () Delete Title:

Name: JONES, PHILIP A Name: JONES, PHILIP A 301 E 1ST ST, 3RD FLOOR 505 NAUTILUS DRIVE Address: Address: City-St-Zip: PORT ST JOE, FL 32456 City-St-Zip: PORT ST JOE, FL 32456

Title: ( ) Delete Title: (X) Change ( ) Addition

MCELHENEY, RANDALL A MCELHENEY, RANDALL A Name: Name: 506 HOLLIS AVE 408 S. BONITA AVE. Address: Address: City-St-Zip: PANAMA CITY, FL 32401 City-St-Zip: PANAMA CITY, FL 32401

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: WILLIAM J. RISH, JR. Ρ 04/27/2007