

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000414

FILED  
Apr 28, 2005  
Secretary of State

Entity Name: MARESTELLA CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

9862 GULF BLVD  
TREASURE ISLAND, FL 33706

## New Principal Place of Business:

9872 GULF BLVD  
TREASURE ISLAND, FL 33706

## Current Mailing Address:

9862 GULF BLVD  
TREASURE ISLAND, FL 33706

## New Mailing Address:

19534 GULF BLVD  
202  
INDIAN SHORES, FL 33785

FEI Number: 20-0702595

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARSENAULT, KENNETH G JR.  
10225 ULMERTON RD STE 2  
LARGO, FL 33771 US

## Name and Address of New Registered Agent:

SMITH, WILLIAM F  
19534 GULF BLVD  
202  
INDIAN SHORES, FL 33785 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: WILLIAM F SMITH

04/28/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: MUNJONE, ARTHUR  
Address: 13120-66 STREET NORTH  
City-St-Zip: LARGO, FL 33773

Title: DV ( ) Delete  
Name: COYLE, R. TERRENCE  
Address: 159-107 AVE  
City-St-Zip: TREASURE ISLAND, FL 33706

Title: DST ( ) Delete  
Name: COYLE, LAUREL ANNE  
Address: 159-107 AVE  
City-St-Zip: TREASURE ISLAND, FL 33706

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: JOHNSON, EMERY  
Address: 138 107TH AVENUE # 297  
City-St-Zip: TREASURE ISLAND, FL 33706

Title: VD (X) Change ( ) Addition  
Name: SOLO, MAXINE  
Address: 9862 GULF BLVD  
City-St-Zip: TREASURE ISLAND, FL 33706

Title: STD (X) Change ( ) Addition  
Name: PURTEE, GARGES  
Address: 9872 GULF BLVD  
City-St-Zip: TREASURE ISLAND, FL 33706

I hereby certify that the information supplied with this filing does not qualify for the 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 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: EMERY JOHNSON

PD

04/28/2005

Electronic Signature of Signing Officer or Director

Date