## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000010848

PENSACOLA, FL 32503

Entity Name: MARBELLA MASTER ASSOCIATION, INC.

FILED Apr 30, 2008 Secretary of State

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

C/O ETHERIDGE PROP. MGMT. 4 LAGUNA ST, STE 201 3298 SUMMIT BLVD, STE 4

FORT WALTON BEACH, FL 32548

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

C/O ETHERIDGE PROP. MGMT. 205 BROOKS ST, STE 201

FORT WALTON BEACH, FL 32548 3298 SUMMIT BLVD, STE 4 PENSACOLA, FL 32503

FEI Number: 20-8597208 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:

ETHERIDGE, RAY O PROGRESSIVE MANAGEMENT OF AMERICA INC 3298 SUMMIT BLVD, STE 4 205 BROOKS ST, STE 201

FORT WALTON BEACH, FL 32548 PENSACOLA, FL 32503 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: MICHAEL G KENT 04/30/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

DELGALLO, STEVEN P DELGALLO, STEVEN P Name: Name: 4 LAGUNA ST SUITE 201 Address: 4 LAGUNA ST, STE 201 Address:

City-St-Zip: FT WALTON BEACH, FL 32548 City-St-Zip: FORT WALTON BEACH, FL 32548

Title: VD ( ) Delete Title: (X) Change ( ) Addition SCHWEIZER, W. TODD Name: SCHWEIZER, W. TODD Name:

Address: 4 LAGUNA ST SUITE 201 Address: 4 LAGUNA ST. STE 201

City-St-Zip: FT WALTON BEACH, FL 32548 City-St-Zip: FORT WALTON BEACH, FL 32548

Title: STD () Delete Title: STD (X) Change ( ) Addition IOVIENO, MICHAEL IOVIENO, MICHAEL Name: Name:

4 LAGUNA ST SUITE 201 4 LAGUNA ST, STE 201 Address: Address:

City-St-Zip: FT WALTON BEACH, FL 32548 City-St-Zip: FORT WALTON BEACH, FL 32548

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: STEVEN P DELGALLO PD 04/30/2008