2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010848

FILED Apr 30, 2009 Secretary of State

Entity Name: MARBELLA MASTER ASSOCIATION, INC.

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

4 LAGUNA ST, STE 201

FORT WALTON BEACH, FL 32548

Current Mailing Address: New Mailing Address:

205 BROOKS ST, STE 201 205 BROOKS STREET SE

FORT WALTON BEACH, FL 32548 STE 201

FORT WALTON BEACH, FL 32548

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:

PROGRESSIVE MANAGEMENT OF AMERICA INC PROGRESSIVE MANAGEMENT OF AMERICA INC

205 BROOKS ST, STE 201 205 BROOKS STREET SE

FORT WALTON BEACH, FL 32548 US STE 201 FORT WALTON BEACH, FL 32548 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 04/30/2009

Electronic Signature of Registered Agent Date

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

Title: PD ()Delete Title: ()Change ()Addition

 Name:
 DELGALLO, STEVEN P
 Name:

 Address:
 4 LAGUNA ST, STE 201
 Address:

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

Title: VD () Delete Title: () Change () Addition

 Name:
 SCHWEIZER, W. TODD
 Name:

 Address:
 4 LAGUNA ST, STE 201
 Address:

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

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

 Name:
 IOVIENO, MICHAEL
 Name:

 Address:
 4 LAGUNA ST, STE 201
 Address:

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

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 DELGALLO PD 04/30/2009