

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Oct 24, 2009**  
**Secretary of State**

DOCUMENT# N05000001285

**Entity Name:** FLAGLER LANDING MARINA ASSOCIATION, INC.**Current Principal Place of Business:**777 EAST ATLANTIC AVENUE  
SUITE 203  
DELRAY BEACH, FL 33483**New Principal Place of Business:**325 CLEMATIS ST  
#202  
WEST PALM BEACH, FL 33401**Current Mailing Address:**777 EAST ATLANTIC AVENUE  
SUITE 203  
DELRAY BEACH, FL 33483**New Mailing Address:**325 CLEMATIS ST  
#202  
WEST PALM BEACH, FL 33401**FEI Number:** 20-3223253**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**OLIVER, BERT R  
955 NW 17TH AVENUE  
BUILDING  
DELRAY BEACH, FL 33445 US**Name and Address of New Registered Agent:**COOK, BARBARA K  
55 E OCEAN BLVD  
STUART, FL 34994 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: BARBARA K COOK

10/24/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ELAM, PRYSE R  
Address: 777 EAST ATLANTIC AVENUE, SUITE 203  
City-St-Zip: DELRAY BEACH, FL 33483

Title: D ( ) Delete  
Name: SCHMIDT, ELIZABETH  
Address: 777 EAST ATLANTIC AVENUE, SUITE 203  
City-St-Zip: DELRAY BEACH, FL 33483

Title: D ( ) Delete  
Name: NYS, ANGIE  
Address: 777 EAST ATLANTIC AVENUE, SUITE 203  
City-St-Zip: DELRAY BEACH, FL 33483

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

Title: PD (X) Change ( ) Addition  
Name: O'DONNELL, SIOBHAN  
Address: PO BOX 4257  
City-St-Zip: JUPITER, FL 33469

Title: VSTD (X) Change ( ) Addition  
Name: BIRMINGHAM, STEPHEN  
Address: 10 GREYSTONE RD  
City-St-Zip: DOVER, MA 02030

Title: D (X) Change ( ) Addition  
Name: ELAM, PRYSE  
Address: 777 E ATLANTIC AVE, SUITE 203  
City-St-Zip: DELRAY BEACH, FL 33483

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: MIKE ALLISON

MGR

10/24/2009

Electronic Signature of Signing Officer or Director

Date