

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05324

FILED
May 06, 2009
Secretary of State

Entity Name: MARINA VIEW CONDOMINIUM OF POMPANO BEACH, INC.

Current Principal Place of Business:

2616 N. RIVERSIDE DR
APT. 3
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

2616 N. RIVERSIDE DR.
#1
POMPANO BEACH, FL 330621242

New Mailing Address:

FEI Number: 65-0261901 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ORGAIN, BENJAMIN W II
2616 N. RIVERSIDE DR.
#1
POMPANO BEACH, FL 330621242 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: THOMPSON, GEORGE
Address: 2616 N RIVERSIDE DR 3
City-St-Zip: POMPANO BEACH, FL

Title: VPD () Delete
Name: LINDNER, WILLIAM
Address: 2616 N. RIVERSIDE DR. #5
City-St-Zip: POMPANO BEACH, FL

Title: TD () Delete
Name: ORGAIN, BENJAMIN II
Address: 2616 N. RIVERSIDE DR. #1
City-St-Zip: POMPANO BEACH, FL

Title: SD () Delete
Name: THOMPSON, PATRICIA
Address: 2616 N. RIVERSIDE DR. 3
City-St-Zip: POMPANO BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: BENJAMIN W. ORGAIN II

TD

05/06/2009

Electronic Signature of Signing Officer or Director

Date