2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N06000000095

1. Entity Name

UNCLE HENRY'S MARINA ASSOCIATION, INC.



FILED Jan 09, 2008 08:00 A Secretary of State

Principal Place of Business

7181-38 COLLEGE PKWY. FT. MYERS, FL 33907 Mailing Address

7181-38 COLLEGE PKWY. FT. MYERS, FL 33907



01072008 No Chg-NP

CR2E037 (4/06)

4. FEI Number 01-0853444

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

SCOTT, WILLIAM G 101 E. KENNEDY BLVD. TAMPA, FL 33602

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TAMPA, FL 33602				IN THIS SPACE			
	named entity submits this statement for the tions of registered agent.	e purpose of changing its registere	ed office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept		
SIGNATURE.	Signature, typed or printed name of registered agent and	itle il applicable. (NOTE: Registered	i Agent signature	t required when reinstating)	DATE		
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees			
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIF PD HALL, VALERIE 7181-38 COLLEGE PKWY. FT. MYERS, FL 33907 VDS	RECTORS	: :		U00000776519 01/09/08-80024-025 61.25		
NAME STREET ADDRESS CITY-ST-ZIP	BIGGS, VICTOR 7181-38 COLLEGE PKWY. FT. MYERS, FL 33907				01/03/05-60024-023-01.23		
NAME STREET ADDRESS CITY-ST-ZIP	VAN CLIEF, MARY ANN 7181-38 COLLEGE PKWY. FT. MYERS, FL 33907		DO NOT WRITE IN THIS SPACE				
TITLE Name Street address City-St-Zip	T PRIGOREANU, MARIA 7181-38 COLLEGE PKWY. FT. MYERS, FL 33907						
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE Name Street address City - St - Zip							
12. I hereby c	ertity that the information supplied with this	s filing does not qualify for the exe	mptions cor	ntained in Chapter 119	9, Florida Statutes. I further certify that the information		

12. I bereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes 1 further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an apachment with an address, with all other like empowered.

lG		

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-08

239275-0002

Daylime Phone #