2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000095

FILED Mar 05, 2009 Secretary of State

Entity Name: UNCLE HENRY'S MARINA ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 7181-38 COLLEGE PKWY. FT. MYERS, FL 33907 **Current Mailing Address: New Mailing Address:** 7181-38 COLLEGE PKWY. FT. MYERS, FL 33907 FEI Number: 01-0853444 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: SCOTT, WILLIAM G 101 E. KENNEDY BLVD TAMPA, FL 33602 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition HALL, VALERIE BIGGS, VICTOR C Name: Name: 7181-38 COLLEGE PKWY. Address: 7181-38 COLLEGE PKWY. Address: City-St-Zip: FT. MYERS, FL 33907 City-St-Zip: FT. MYERS, FL 33907 Title: VDS Title: (X) Change () Addition () Delete BIGGS, VICTOR Name: VAN CLILEF, MARY ANN Name: Address: 7181-38 COLLEGE PKWY. Address: 400 KELBY STREET City-St-Zip: FT. MYERS, FL 33907 City-St-Zip: FORT LEE, NJ 07024 Title: () Delete Title: (X) Change () Addition ROBT, VANY O VANYO, ROBERT Name: Name: 7181-38 COLLEGE PKWY. 7181-38 COLLEGE PKWY. Address: Address: City-St-Zip: FT. MYERS, FL 33907 City-St-Zip: FT. MYERS, FL 33907 Title: () Delete Title: (X) Change () Addition Name: PRIGOREANU, MARIA Name: BILLENA, MANUEL F 400 KELBY STREET Address: 7181-38 COLLEGE PKWY. Address: City-St-Zip: FT. MYERS, FL 33907 City-St-Zip: FORT LEE, NJ 07024 Title: () Delete Title: () Change (X) Addition CAPRIGLIONE, DONNA Name: Name: 400 KELBY STREET Address: Address: FORT LEE, NJ 07024 City-St-Zip: 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: MARY ANN VAN CLIEF VP 03/05/2009