

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010611

FILED
Mar 09, 2009
Secretary of State

Entity Name: MARINA SAN PABLO MASTER ASSOCIATION, INC.

Current Principal Place of Business:

14402 MARINA SAN PABLO PLACE
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

C/O JDR REAL ESTATE MANAGEMENT, INC.
3020 HARTLEY ROAD, SUITE 300
JACKSONVILLE, FL 32257

New Mailing Address:

FEI Number: 20-5773652

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JDR REAL ESTATE MANAGEMENT, INC.
3020 HARTLEY ROAD, SUITE 300
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

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: DP () Delete
Name: ROOD, JOHN D
Address: 3020 HARTLEY ROAD, SUITE 300
City-St-Zip: JACKSONVILLE, FL 32257

Title: DV () Delete
Name: MORGAN, WILLIAM L
Address: 3020 HARTLEY ROAD, SUITE 300
City-St-Zip: JACKSONVILLE, FL 32257

Title: ST () Delete
Name: SCHACHT, THOMAS J
Address: 3020 HARTLEY ROAD, SUITE 300
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Delete
Name: QUINN, SARA
Address: 14402 MARINA SAN PABLO PLACE, #704
City-St-Zip: JACKSONVILLE, FL 32224

Title: D () Delete
Name: GREWELL, BRUCE
Address: 14402 MARINA SAN PABLO PLACE, #104
City-St-Zip: JACKSONVILLE, FL 32224

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:

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: JOHN D. ROOD

OFCR

03/09/2009

Electronic Signature of Signing Officer or Director

Date