

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12763

FILED  
Jan 07, 2009  
Secretary of State

**Entity Name:** MARINE INDUSTRIES ASSOCIATION OF PALM BEACH COUNTY, INC.

**Current Principal Place of Business:**

349 GRANADA ROAD  
WEST PALM BEACH, FL 33401 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 7597  
WEST PALM BEACH, FL 33405 US

**New Mailing Address:**

**FEI Number:** 59-2834931

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PRUITT, ALISON  
EXECUTIVE DIRECTOR  
349 GRANADA ROAD  
WEST PALM BEACH, FL 33401 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: VP ( ) Delete  
Name: CARTER, GEORGE  
Address: 251 W 11TH STREET  
City-St-Zip: RIVIERA BEACH, FL 33407 US

Title: BD ( ) Delete  
Name: ERICKSON, MICHAEL  
Address: 1500 AUSTRALIAN AVENUE  
City-St-Zip: RIVIERA BEACH, FL 33404 US

Title: P ( ) Delete  
Name: ISIMINGER, CHARLES  
Address: 649 US HWY 1, STE #9  
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: VP ( ) Delete  
Name: TOLDERLUND, AMY  
Address: 1509 AVENUE C  
City-St-Zip: RIVIERA BEACH, FL 33404 US

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

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

Title: SEC (X) Change ( ) Addition  
Name: OENBRINK, TIM  
Address: 1306 53RD STREET  
City-St-Zip: MANGONIA PARK, FL 33410 US

Title: TR (X) Change ( ) Addition  
Name: TWYFORD, TOM  
Address: 201 FIFTH STREET  
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: P (X) Change ( ) Addition  
Name: TOLDERLUND, AMY  
Address: 1509 AVENUE C  
City-St-Zip: RIVIERA BEACH, FL 33404 US

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: ALISON PRUITT

ED

01/07/2009

Electronic Signature of Signing Officer or Director

Date