

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 10, 2008 08:00 A
Secretary of State

DOCUMENT # N14868

1. Entity Name

MARLIN INDUSTRIAL PARK OWNERS ASSOCIATION,
INC.



Principal Place of Business

2501 FLORAL RD
LANTANA, FL 33462

Mailing Address

C/O CAROL LINDSEY
2501 FLORAL RD.
LANTANA, FL 33462 US



02262008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2713700

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LINDSEY, M CAROL
2501 FLORAL RD
LANTANA, FL 33462

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DP
PARTON, JOHN
3575 23RD AVE. SOUTH #107
LAKE WORTH, FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DS
LINDSEY, M C
2501 FLORAL RD
LANTANA, FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
MACERA, JERRY
601 N. CONGRESS # 425
DELRAY BEACH, FL 33445

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
SMYTH, WILLIAM
3718 23RD AVE SO
LAKE WORTH, FL 33461

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
GARAMY, GEORGE
7643 NEMEC DRIVE S
WEST PALM BEACH, FL 33406

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DT
BUSCHMANN, GENE
3600 23RD AVE S
LAKE WORTH, FL 33461

000000852914
03/26/08-80044-017 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 attachment with an address, with all other like empowered.

SIGNATURE:

M. Carol Lindsey M. Carol Lindsey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-7-08

Date

561-433-2100

Daytime Phone #