2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N17365

Entity Name: MARSH COVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 123 W HIRTH RD 463499 STATE ROAD 200 YULEE, FL 32097 **OFFICE** FERNANDINA BCH, FL 32034 US **New Mailing Address: Current Mailing Address:** 220 BOY-SCOUT ROAD P O BOX 1987 AUGUSTA, GA 30909 YULEE, FL 32041 FEI Number: 90-0243446 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: BELANGIA, BILL PROPERTY MANAGEMENT SYSTEMS, INC 463499 STATE ROAD 200 123 WEST HIRTH ROAD US FERNANDINA BEACH, FL 32034 YULEE, FL 32097 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: TERRELL J POWELL 06/01/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition THIBAULT, J PAUL Name: Name: 123 W HIRTH RD APT-2001 Address: Address: City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: Title: () Delete Title: (X) Change () Addition KENNEDY, WESLEY R Name: SCHROEDER, ROBERT Name: Address: 123 W. HIRTH RD #801 Address: 123 W. HIRTH RD #102 City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: FERNANDINA BEACH, FL 32034 Title: () Delete Title: () Change () Addition BELANGIA, BILL Name: Name: Address: 220 BOYSCOUT ROAD Address: City-St-Zip: AUGUSTA, GA City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: GRANT, BOB 123 W HIRTH RD #1103 Address: Address: City-St-Zip: City-St-Zip: FERNANDINA BEACH, FL 32034 Title: () Delete Title: () Change (X) Addition WALKER, DAVID Name: Name: 123 W HIRTH RD #103 Address: Address: City-St-Zip: City-St-Zip: FERNANDINA BEACH, FL 32034 Title: () Delete Title: () Change (X) Addition GUNSEL. TERRY Name: Name: Address: Address: 123 W HIRTH RD #101 FERNANDINA BEACH, FL 32034 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID WALKER P 06/01/2006

FILED Jun 01, 2006

Secretary of State