

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 20, 2009
Secretary of State**

DOCUMENT# N19240

Entity Name: MARITANA COURT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3390 W MARITANA DR
5
ST. PETE BEACH, FL 33706 US

New Principal Place of Business:

Current Mailing Address:

3390 W MARITANA DR
5
ST. PETE BEACH, FL 33706 US

New Mailing Address:

FEI Number: 59-2917128 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARIEN, KATHERINE C
3390 W MARITANA DR
5
ST. PETE BEACH, FL 33706 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: PRD () Delete
Name: NAPOLITANO, ANTHONY
Address: 3390 W MARITANA DR #6
City-St-Zip: SAINT PETERSBURG, FL 33706 US

Title: VTD () Delete
Name: MARIEN, KATHERINE C
Address: 3390 W MARITANA DR #5
City-St-Zip: SAINT PETERSBURG, FL 33706 US

Title: PSD () Delete
Name: CANTOR, JOEL
Address: 3390 W. MARITANA DR #4
City-St-Zip: SAINT PETERSBURG, FL 33706 US

Title: PSD () Delete
Name: KELLEY, EUGENE F
Address: 3390 W MARITANA DR #5
City-St-Zip: ST PETERSBURG, FL 33706 US

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:

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: KATHERINE C MARIEN

MS

01/20/2009

Electronic Signature of Signing Officer or Director

Date