

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20667

FILED  
Apr 17, 2009  
Secretary of State

**Entity Name:** THE MARINA CLUB OF TAMPA, BUILDING K, CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2424 W. TAMPA BAY BLVD  
K101  
TAMPA, FL 33607 US

**New Principal Place of Business:**

2424 TAMPA BAY BLVD  
K 202  
TAMPA, FL 33607 US

**Current Mailing Address:**

2424 W. TAMPA BAY BLVD  
K101  
TAMPA, FL 33607 US

**New Mailing Address:**

P.O.BOX 4306  
ALPHARETTA, GA 30023 US

FEI Number: 59-2396368

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SIMMONS, WAYNE G  
2424 W. TAMPA BAY BLVD  
K-101  
TAMPA, FL 33607 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: P ( ) Delete  
Name: SIMMONS, WAYNE G  
Address: 2424 W. TAMPA BAY BLVD K101  
City-St-Zip: TAMPA, FL 33607

Title: V ( ) Delete  
Name: KLEIN, PETER J  
Address: 2424 W TAMPA BAY BLVD #K202  
City-St-Zip: TAMPA, FL 33607

Title: D ( ) Delete  
Name: GAY, GILLIAN  
Address: 2424 TAMPA BAY BLVD # K204  
City-St-Zip: TAMPA, FL 33607

**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:

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: WAYNE G. SIMMONS

P

04/17/2009

Electronic Signature of Signing Officer or Director

Date