

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2008 8:00 am
Secretary of State

03-26-2008 90019 020 ****61.25

DOCUMENT # N23671 1. Entity Name MARSH LAKE COMMUNITY ASSOCIATION, INC.					
Principal Place of Business AMELIA ISLAND MANAGEMENT 3000 FIRST COAST HIGHWAY AMELIA ISLAND, FL 32034			Mailing Address AMELIA ISLAND MANAGEMENT 3000 FIRST COAST HIGHWAY AMELIA ISLAND, FL 32034		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2867832	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
GREGORY, DAVID AMELIA ISLAND MGMT. 3000 FIRST COAST HWY. AMELIA ISLAND, FL 32034				Name Jack B. Healan, Jr.	
				Street Address (P.O. Box Number is Not Acceptable) 3000 First Coast Hwy	
				City Amelia Island, FL Zip Code 32034	
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 <u>Jack B. Healan, Jr.</u>  <u>3/11/08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	COOPER, LORETTA		NAME	SEE ATTACHED PAGE	
STREET ADDRESS	27 SECRET COVE CRT		STREET ADDRESS		
CITY-ST-ZIP	FERNANDINA BEACH, FL 32034		CITY-ST-ZIP		
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BURKE, NICK		NAME		
STREET ADDRESS	313 MARSH LAKE DR		STREET ADDRESS		
CITY-ST-ZIP	FERNANDINA BEACH, FL 32034		CITY-ST-ZIP		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CROUSER, TOM		NAME		
STREET ADDRESS	92 MARSH LAKES DR.		STREET ADDRESS		
CITY-ST-ZIP	FERNANDINA BEACH, FL 32034		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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: 			2/25/08 904 277 5121 <small>Date Daytime Phone #</small>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR</small>					

ATTACHMENT

40051831

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT – PAGE 2

Document # N23671

MARSH LAKE COMMUNITY ASSOCIATION, INC.

11. OFFICERS AND DIRECTORS - CHANGES:

ADDITIONS:

Vice President
and Director: Barbara Gingher
P.O. Box 16212
Fernandina Beach, FL 32035

Secretary
and Director: Wilma Allen
168 Marsh Lakes Drive
Fernandina Beach, FL 32034

Treasurer
and Director: Steven Traver
4652 Village Drive
Fernandina Beach, FL 32034

Director: Jennifer Kelly-Sheffield
96201 Marsh Lakes Drive
Fernandina Beach, FL 32034