

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jul 29, 2004 8:00 am**  
**Secretary of State**

07-29-2004 90007 039 \*\*\*\*61.25

**DOCUMENT # N26060**

1- Entity Name

THE MARINA CLUB OF TAMPA, BUILDING L,  
CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

2424 W TAMPA BAY BLVD  
L-201 L-102  
TAMPA FL 33607  
US

Mailing Address

2424 W TAMPA BAY BLVD  
L-201 L-102  
TAMPA FL 33607  
US

54065762



2. Principal Place of Business

2424 W. Tampa Bay Blvd  
Suite, Apt. #, etc.  
L-102

3. Mailing Address

2424 W. Tampa Bay Blvd  
Suite, Apt. #, etc.  
L-102

MOORE

CR2E037 (4/04)

City & State

Tampa, Florida

City & State

Tampa, Florida

4. FEI Number

59-2889665

Applied For

Not Applicable

Zip

33607

Country

Hillsborough

Zip

33607

Country

Hillsborough

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BRUDNY, MICHAEL J  
28100 U.S. 19 NORTH  
SUITE 300  
CLEARWATER FL 33761

7. Name and Address of New Registered Agent

Name: Mario Cainas  
Street Address (P.O. Box Number is Not Acceptable):  
2424 W. Tampa Bay Blvd  
L-205  
City: Tampa FL Zip Code: 33607

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

7-26-04

**FILE NOW: FEE IS \$61.25**  
**Due By September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE: PD  
NAME: CAINAS, MARIO  
STREET ADDRESS: 2424 W TAMPA BAY BLVD L-206 L-205  
CITY-ST-ZIP: TAMPA FL 33607

TITLE: DV  
NAME: CAINAS, MARIO  
STREET ADDRESS: 2424 W TAMPA BAY BLVD, L-206 L-205  
CITY-ST-ZIP: TAMPA FL 33607

TITLE: VPD  
NAME: CEYROLLES, RONALD J  
STREET ADDRESS: 2424 W TAMPA BAY BLVD L-303  
CITY-ST-ZIP: TAMPA FL 33607

TITLE: SD  
NAME: MCCATTY, MARY D  
STREET ADDRESS: 2424 W TAMPA BAY BLVD L-102  
CITY-ST-ZIP: TAMPA FL 33607

TITLE: STD  
NAME: MCCATTY, MARY D  
STREET ADDRESS: 2424 W TAMPA BAY BLVD L-102  
CITY-ST-ZIP: TAMPA FL 33607

TITLE: ☐ Delete  
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☒ Change ☐ Addition  
NAME: Cainas, Mario  
STREET ADDRESS: 2424 W. Tampa Bay Blvd  
CITY-ST-ZIP: L-205

TITLE: ☒ Change ☐ Addition  
NAME: Mario Cainas  
STREET ADDRESS: 2424 W. Tampa Bay Blvd  
CITY-ST-ZIP: Tampa, FL 33607

TITLE: ☐ Change ☒ Addition  
NAME: Yolanda M. Romero  
STREET ADDRESS: 2424 W. Tampa Bay Blvd  
CITY-ST-ZIP: Tampa, Florida 33607

TITLE: ☐ Change ☐ Addition  
NAME: Same  
STREET ADDRESS:   
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition  
NAME: Same  
STREET ADDRESS:   
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition  
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-26-04

Date

Daytime Phone #