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May 08 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N26751 (0)

1. Corporation Name
MARSH POINTE AT MARSH LANDING OWNERS ASSOCIATION, INC.

Principal Place of Business POST OFFICE BOX 768 PONTE VEDRA BEACH FL 32004 US	Mailing Address POST OFFICE BOX 768 PONTE VEDRA BEACH FL 32004-0768 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip Country 28		3. Date Incorporated or Qualified 06/02/1988	3a. Date of Last Report 05/01/1996
4. FEI Number 59-1547788		Applied For Not Applicable		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No			

9. Name and Address of Current Registered Agent SNEED, LYNNE M 116 CARRIAGE LAMP WAY PONTE VEDRA BEACH FL 32082		10. Name and Address of New Registered Agent 81 Name MORRISSEY, PATRICK J. 82 Street Address (P.O. Box Number is Not Acceptable) 101 CARRIAGE LAMP WAY 83 84 City PONTE VEDRA BEACH FL 85 Zip Code 32082	
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Patrick J. Morrissey **PATRICK J. MORRISSEY, TREASURER** 4/23/97
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, DAVID P 128 CARRIAGE LAMP WAY PONTE VEDRA BEACH FL ☒ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	V/S Mc CAMEY, H. BRUCE 108 CARRIAGE LAMP WAY PONTE VEDRA BEACH, FL 32082 ☒ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'STEEN, BETTY J 191 BRIDLE WAY PONTE VEDRA BEACH FL ☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MORRISSEY, PATRICK J. 101 CARRIAGE LAMP WAY PONTE VEDRA BEACH FL ☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SNEED, LYNNE M 116 CARRIAGE LAMP WAY PONTE VEDRA BEACH FL ☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	D ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MILLER, PAMELA A 128 CARRIAGE LAMP WAY PONTE VEDRA BEACH FL ☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	P ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHORT, HELEN E 187 BRIDLE WAY PONTE VEDRA BEACH FL ☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Patrick J. Morrissey **PATRICK J. MORRISSEY, TREASURER** 4/23/97 359-3120
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0000013

CR2E037 (9/96)