## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # N26751

1. Entity Name

MARSH POINTE AT MARSH LANDING OWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

POST OFFICE BOX 768

PONTE VEDRA BEACH, FL 32004 US

POST OFFICE BOX 768

PONTE VEDRA BEACH, FL 32004 US

## FILED May 18, 2007 8:00 am Secretary of State

05-18-2007 90024 022 \*\*\*\*61.25



01182007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 59-3056114

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

MCCAMEY, LORRAINE PATRICK MORRISSEY
108 CARRIAGE LAMPWAY
PONTE VEDRA BEACH, FL 32082

## DO NOT WRITE IN THIS SPACE

	IN THIS SPACE
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.	
	SARER April 36, 2007
Signature, typed or printed name of registered agent she fulle if applicable. (NOTE: Registered Agent signature required when reinstating) OATE	
Fiting Fee is \$61.25 Due by May 1, 2007  9. Election Campaign Financing \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS	
NAME STREET ADDRESS CITY-ST-ZIP PONTE VEDRA BGH, FL 32082	ENRY TUTEN O CARRIAGE LAMP WAY OUTE VEERA BEACH, FL 32082
NAME STANLEY, PEGGY STREET ADDRESS 120 CARRIAGE LAMP WAY PONTE VEDRA BEACH, FL 32082	
TITLE P  NAME HUNTLEY-ROBERTSON, PETER  STREET ADDRESS 183 BRIDLE WAY  CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082	DO NOT WRITE
IIILE  NAME  HARRIS, JOHN  DELETE  SUZA  STREET ADDRESS  116 CARRIAGE LAMP WAY  CITY-ST-ZIP  PONTE VEDRA BEACH, FL 32082  PONTE	NNE TUCKER IN THIS SPACE WAY VE ERA DEACH, FL 32082
TITLE  NAME  MILLER, PAMELA  STREET ADDRESS  128 CARRIAGE LAMP WAY  PONTE VEDRA BEACH, FL 32082	
TITLE NAME MCCAMEY, LORRAINE DELETE STREET ADDRESS 108 CARRIAGE LAMP WAY PONTE VEDRA BEACH, FL 32082	PATRICK MORRISSEY  PATRICK MORRISSEY  PORTE VERRAGE LAMP WAY  PONTE VERRA BEACH, FL 32082
12. I have by partify that the information available with this filling days and available to a	

14. I nereby 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:

atuch Mousse

PATRICK MORRISSEY

4/30/07

904-285-5191

Daytime Phone #