

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 04, 2003 8:00 am
Secretary of State

07-03-2003 90035 010 ****61.25

DOCUMENT # N34625

1. Entity Name
THE BLUFFS MARINA ASSOCIATION, INC.



Principal Place of Business
**1320 TIDAL POINTE BLVD
JUPITER FL 33477**

Mailing Address
**1320 TIDAL POINTE BLVD
JUPITER FL 33477**

55053139



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2762677**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BAKER, COLLEEN E
495 PEACOCK LANE NORTH
JUPITER FL 33458**

Name **CHRISTOPHER J. BAKER**

Street Address (P.O. Box Number is Not Acceptable)

495 PEACOCK LANE N.

JUPITER

FL Zip Code **33458**

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

(NOTE: Registered Agent signature required when reinstating)

April 15, 2003

FILE NOW: FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** Delete
NAME **BAKER, CHRISTOPHER J**
STREET ADDRESS **495 PEACOCK LANE NORTH**
CITY-ST-ZIP **JUPITER FL 33458**

TITLE **DIRECTOR** Change Addition
NAME **WALTER MORGAN**
STREET ADDRESS **315 N.E. 3RD AVE, SUITE 201**
CITY-ST-ZIP **FT. LAUDERDALE, FLORIDA 33301**

TITLE **VPOT** Delete
NAME **BAKER, COLLEEN E**
STREET ADDRESS **495 PEACOCK LANE NORTH**
CITY-ST-ZIP **JUPITER FL 33458**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** Delete
NAME **BURGER, CHARLIE**
STREET ADDRESS **1320 TIDAL POINTE BLVD**
CITY-ST-ZIP **JUPITER FL 33477**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
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 registered 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 a signature with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 15, 2003 561-627-6688

Date

Daytime Phone #

CR2E037 (10/02)