

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # N37330 1. Entity Name ST. PETERSBURG MUNICIPAL MARINA TENANTS, INC.	
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Principal Place of Business 300 SECOND AVE SE ST. PETERSBURG, FL 33701 US	Maining Address 101 BAYSHORE DRIVE NE BOX #1 ST. PETERSBURG, FL 33701 US
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04232006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3007730	App'ed For Not App'ed
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BARBOUR, PAUL 101 BAYSHORE DRIVE NE BOX #1 ST. PETERSBURG, FL 33701

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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.

SIGNATURE _____
Signature, location and date of registered agent and the Treasurer, if the registered agent is not the Treasurer, and the date of the filing.

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	PD BARBUR, PAUL 101 BAYSHORE DR NE #1 SAINT PETERSBURG, FL 33701
TITLE NAME STREET ADDRESS CITY ST ZIP	VD CLARK, MICHAEL 101 BAYSHORE SR NE #3 SAINT PETERSBURG, FL 33701
TITLE NAME STREET ADDRESS CITY ST ZIP	SD HAZELTINE, SHARISSA 300 2ND AVE SE #37 SAINT PETERSBURG, FL 33701
TITLE NAME STREET ADDRESS CITY ST ZIP	TD JACK, DORSEY 101 BAYSHORE DR NE #5 SAINT PETERSBURG, FL 33701
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	

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05/08/06-80020-009 61.25

**DO NOT WRITE
IN THIS SPACE**

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 a further "be empowered."

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/06 7278240990