

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 09, 2008 8:00 am
Secretary of State

05-09-2008 90016 021 ****61.25

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1. Entity Name

MARSH COVE II OWNERS ASSOCIATION, INC.



Principal Place of Business

200 EXECUTIVE WAY
SUITE 111
PONTE VEDRA FL 32084
US

Mailing Address

P. O. BOX 2055
PONTE VEDRA FL 32004

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-3269336

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

EWING, JOHN T
200 EXECUTIVE WAY
SUITE 111
PONTE VEDRA FL 32084

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 is required when registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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	P	☒ Delete
NAME	MCVAY, MICHAEL T	
STREET ADDRESS	161 SHELBY'S COVE CT.	
CITY- ST- ZIP	PONTE VEDRA BCH FL 32082	
TITLE	D	☐ Delete
NAME	NADER, LIZ	
STREET ADDRESS	712 MARSH COVE LANE	
CITY- ST- ZIP	PONTE VEDRA BEACH FL 32082	
TITLE	V	☐ Delete
NAME	MORSE, GAIL	
STREET ADDRESS	744 MARSH COVE LANE	
CITY- ST- ZIP	PONTE VEDRA BEACH FL 32082	
TITLE	ST	☒ Delete
NAME	SELLERS, KRISTI	
STREET ADDRESS	753 MARSH COVE LN	
CITY- ST- ZIP	PONTE VEDRA BEACH FL 32082	
TITLE	D	☒ Delete
NAME	KEITH, ELEISE	
STREET ADDRESS	101 SHELBY'S COVE CT	
CITY- ST- ZIP	PONTE VEDRA BEACH FL 32082	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	☐ Change ☒ Addition
NAME	MIKE FRITSCH	
STREET ADDRESS	749 MARSH COVE LANE	
CITY- ST- ZIP	PONTE VEDRA, FL 32082	
TITLE	S	☐ Change ☒ Addition
NAME	DEBRA DEMPSEY	
STREET ADDRESS	736 MARSH COVE LANE	
CITY- ST- ZIP	PONTE VEDRA, FL 32082	
TITLE	T	☐ Change ☒ Addition
NAME	BARBARA WILSON	
STREET ADDRESS	152 SHELBY'S COVE CT.	
CITY- ST- ZIP	PONTE VEDRA, FL 32082	
TITLE		☐ Change ☐ Addition
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 exemptions contained in Section 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: *Mike Fritsch* MIKE FRITSCH 4/23/08 904-280-7616