FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9600000532 (9)

MARLIN RUN II CONDOMINIUM ASSOCIATION, INC.

Principal	Place	of	Rusiness		

Mailing Address

FILED Jun 10 1997 8:00am Secretary of State



2020 CLUBHOUSE DRIVE 2020 CLUBHOUSE DRIVE SUN CITY CENTER FL 33573 SUN CITY CENTER FL 33573		73-5914							
				3. Date Incorporated or Qualified 01/30/1996	d 3a. Date of Last Report				
		2a. Mailing Address		4. FEI Number		Applied For			
21		26		59-343/18	5	Not Applicable			
Suite, Apr. W, etc. 27		27	Suite, Apt. #, etc.		5. Certificate of Status Desired	□ \$8.7	5 Additional Required		
City & State	City & State City & State 23 28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip 24	Country 25	Zip 29	Counti 30	У	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
	9. Name and Address of Current	Registered Agent		-	10. Name and Address of New Re	gistered Agent			
			8.	Name	ROBERT E. GREENE				
STARKEY, JERRY L 2020 CLUBHOUSE DRIVE			6:	Street A	Address (P.O. Box Number is Not Acceptable) 1904 CLUBHOUSE DRIVE				
SUN CITY CENTER FL 33573			8	3	0.0017 M M M	5 3			
			84] ***,	SUN CITY CENTER	FL 85	Zip Code 33573		
11. Pursuant	to the provisions of Septions 617.0502	arto 617.1508, Florida Statute	es, the above	ve-named o	corporation submits this statement for the p oration's board of directors. I hereby accep	surpose of changir	ng its registered		
agent. I a	m familiar with and accept the obligat	ions of, Section 617.0503, Flo	rida Statute	iy the corp es.	oration's board of directors. I hereby accep	ot the appointment	t as registered		
SIGNATURE					4	16/97			
12.	Signature, typed or printed name of registered agent OFFICERS AND		Registered A	gent signature r	required when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE DIDECT	TODE IV ID		
TITLE	PD	M DELETE	1.1 TITLE	T	PD	Chan			
NAME	KELSEY, PATRICIA A	 · -	1.2 NAME		JOHANSEN, ROGER B.		as ETI NOOMON		
STREET ADDRESS			1.3 STREE	T ADDRESS	550 ISLAMORADA BLVD.				
CITY-ST-ZIP	ALMI ARTY AFTITED EL AAFTA			ST-ZIP	PUNTA GORDA, FL 33955				
TITLE			2.1 TITLE		VD Change V				
NAME			2.2 NAME		BALLOU, III, DEFORREST		:		
STREET ADDRESS				ET ADDRESS 544 ISLAMORADA BLVD.			-		
CITY-ST-2IP				ST-2IP	PUNTA GORDA, FL 33955				
TITLE	STD X DELETE 3.5			İ	STD Change X Addition				
NAME	FLINN, MILTON 2020 CLUBHOUSE DRIVE 32 33				HOOD, THOMAS E.				
STREET ADORESS City-St-Zip	OUN OTH OTHER EL ANTA			T ADDRESS	8105 PLUM CREEK DRIVE				
TITLE	DELETE 4:			-ST - ZIP	GAITHERSBURG, MD 20882				
NAME			4. 2 NAMI	.					
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		//	, 1		
TITLE		☐ DELETE	5.1 TITLE			Chan	ge Addition		
NAME			5.2 NAME			1/15/	Z. L 1		
STREET ADDRESS			5.3 STREE	T ADDRESS		\\\\\\ \	10/97		
CITY-ST-ZIP	- 4	Devere	5.4 CITY-	ST-ZIP		101			
TITLE		DELETE	6.1 TITLE			Chan	ge LJ Addition		
NAME Street address			6.2 NAME	I		_	4 . ,		
CITY-ST-ZIP				T ADDRESS ST-ZIP	Change Addition				
V() 1 - V - L()			0.4 0111	01-71L		ツンめい ししげ	-		

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. Puriher 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.