## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000004992

FILED Apr 21, 2009 Secretary of State

Entity Name: MARINA ISLE AT BONITA BAY ASSOCIATION, INC.

**Current Principal Place of Business:** 

New Principal Place of Business:

%GULF BREEZE MGMT. SVCS. OF SW FL, LLC

8910 TERRENCE CT, STE 200 BONITA SPRINGS, FL 34135 US 8910 TERRENE CT, STE 200

%GULF BREEZE MGMT. SVCS. OF SW FL, LLC

BONITA SPRINGS, FL 34135 US

**Current Mailing Address:** 

New Mailing Address:

%GULF BREEZE MGMT. SVCS. OF SW FL, LLC

8910 TERRENCE CT, STE 200 BONITA SPRINGS, FL 34135 LIS %GULF BREEZE MGMT. SVCS. OF SW FL, LLC 8910 TERRENE CT, STE 200

BONITA SPRINGS, FL 34135 US

FEI Number: 65-0693703

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WEIDNER, RALPH L

%GULF BREEZE MGMT. SVCS. OF SW FL, LLC

8910 TERRENCE CT, STE 200 BONITA SPRINGS, FL 34135 US WEIDNER, RALPH L

%GULF BŔEEZE MGMT. SVCS. OF SW FL, LLC

8910 TERRENE CT,, STE 200 BONITA SPRINGS, FL 34135 US

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.

SIGNATURE:

04/21/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:** 

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition

() Change () Addition

STD () Delete WHATLEY, TOM Name:

27690 MARINA ISLE CT Address: City-St-Zip: BONITA SPRINGS, FL 34134

Title:

WIDMER, BARBARA

27730 MARINA ISLE CT

BONITA SPRINGS, FL 34134

Title: PD () Delete HERMAN, ARTHUR Name: Address: 27760 MARINA ISLE CT City-St-Zip: BONITA SPRINGS, FL 34134

Name: Address: City-St-Zip:

Name:

Address:

City-St-Zip:

Title: () Delete

KOPPELMAN, WILLIAM Name: 37620 MARINA ISLE CT Address: City-St-Zip: BONITA SPRINGS, FL 34134 Title: (X) Change ( ) Addition

Name: KOPPELMAN, WILLIAM 27620 MARINA ISLE CT Address: City-St-Zip: BONITA SPRINGS, FL 34134

**PRES** 

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARTHUR HERMAN Electronic Signature of Signing Officer or Director 04/21/2009 Date