2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2009
Secretary of State

DOCUMENT# N97000001074

Entity Name: VIA MARINA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

248 VENETIAN DRIVE
DELRAY BEACH, FL 33483 US

New Principal Place of Business:

Current Mailing Address:

248 VENETIAN DRIVE
DELRAY BEACH, FL 33483 US

New Mailing Address:

FEI Number: 59-3500174 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WARNER, KEVIN P
248 VENETIAN DR.
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: WARNER, KEVIN P
Address: 248 VENETIAN DRIVE
City-St-Zip: DELRAY BEACH, FL 33483

Title: VPD ( ) Delete
Name: KNEAFSEY, JACK
Address: 252 VENETIAN DRIVE
City-St-Zip: DELRAY BEACH, FL 33483

Title: SD ( ) Delete
Name: SCHUMANN, MARK
Address: 246 VENETIAN DR
City-St-Zip: DELRAY BEACH, FL 33483

Title: T ( ) Delete
Name: WARNER, JOHN
Address: 256 VENETIAN DR.
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: KEVIN P. WARNER PD 02/01/2009

Electronic Signature of Signing Officer or Director — Date