

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007199

FILED
Jan 17, 2005
Secretary of State

Entity Name: MARINA MANOR ASSOCIATION, INC.

Current Principal Place of Business:

5545 HARBOR DRIVE
LAKELAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

5545 HARBOR DRIVE
LAKELAND, FL 33809

New Mailing Address:

FEI Number: 59-3300876

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, MICHAEL
5545 HARBOR DRIVE
LAKELAND, FL 33809 US

Name and Address of New Registered Agent:

THOMPSON, MICHAEL W
5545 HARBOR DRIVE
LAKELAND, FL 33809 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: MICHAEL W. THOMPSON

01/17/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GROSSE, TED
Address: 5502 HARBOR DRIVE EAST
City-St-Zip: LAKELAND, FL 33809

Title: VD () Delete
Name: WEWE, DOTTIE J
Address: 5410 HARBOR DRIVE EAST
City-St-Zip: LAKELAND, FL 33809

Title: SD () Delete
Name: WARLEN, DEBORAH
Address: 5545 HARBOR DRIVE
City-St-Zip: LAKELAND, FL 33809

Title: TD () Delete
Name: MUMBAUER, MELISSA
Address: 5545 HARBOR DRIVE
City-St-Zip: LAKELAND, FL 33809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: THOMPSON, MICHAEL W
Address: 5545 HARBOR DRIVE
City-St-Zip: LAKELAND, FL 33809

Title: VD (X) Change () Addition
Name: COTE, PHILIP
Address: 5438 HARBOR DRIVE
City-St-Zip: LAKELAND, FL 33809

Title: SD (X) Change () Addition
Name: MUMBAUER, MELISSA
Address: 5322 HARBOR DRIVE EAST
City-St-Zip: LAKELAND, FL 33809

Title: TD (X) Change () Addition
Name: ROMIG, COREY
Address: 5427 HARBOR DRIVE EAST
City-St-Zip: LAKELAND, FL 33809

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL W. THOMPSON

PD

01/17/2005

Electronic Signature of Signing Officer or Director

Date