2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2008
Secretary of State

DOCUMENT# N99000004203

Entity Name: MARINA BAY CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1600 MARINA BAY DRIVE
SUITE 200
PANAMA CITY, FL 32409

New Principal Place of Business:

Current Mailing Address:

1600 MARINA BAY DRIVE
PANAMA CITY, FL 32409

New Mailing Address:

FEI Number: 59-3531629 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARDNER, ROBERT A
1600 MARINA BAY DRIVE
SUITE 200
PANAMA CITY, FL 32409 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: D ( ) Delete
Name: STRICKLAND, FRED
Address: 1600 MARINA BAY DRIVE SUITE 301
City-St-Zip: PANAMA CITY, FL 32409

Title: D ( ) Delete
Name: GARDNER, ROBERT
Address: 1600 MARINA BAY DRIVE SUITE 801
City-St-Zip: PANAMA CITY, FL 32409

Title: D ( ) Delete
Name: RAMSEY, DIANE
Address: 1600 MARINA BAY DRIVE SUITE 605
City-St-Zip: PANAMA CITY, FL 32409

Title: D ( ) Delete
Name: SIMPSON, RICHARD
Address: 1600 MARINA BAY DRIVE SUITE 506
City-St-Zip: PANAMA CITY, FL 32409

Title: D ( ) Delete
Name: SCHAUZ, WILLIAM
Address: 1600 MARINA BAY DRIVE SUITE 509
City-St-Zip: PANAMA CITY, FL 32409

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:

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: FRED STRICKLAND D 01/12/2008

Electronic Signature of Signing Officer or Director — Date