## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000007306

FILED Mar 29, 2007 Secretary of State

Entity Name: MARQUESA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

200 121ST AVE. W.

TREASURE ISLAND, FL 33706

Current Mailing Address: New Mailing Address:

C/O QUALITY MGMT SERVICE
PO BOX 66245
ST PETERSBURG BEACH, FL 33736
C/O CONDO MGT PLUS, INC.
PO BOX 86507
MADEIRA BEACH, FL 33738

FEI Number: 59-3484942 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:

TYRRELL, DAVID 200 121ST AVE. WEST, UNIT 202 TREASURE ISLAND, FL 33706 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:

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DV ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 YOUHN, JEANNE
 Name:
 PEGGS, JOSEPH

 Address:
 200 121ST AVE. W., UNIT 403
 Address:
 200 121ST AVE. W., UNIT 403

 City-St-Zip:
 TREASURE ISLAND, FL 33706
 City-St-Zip:
 TREASURE ISLAND, FL 33706

Title: DS ( ) Delete Title: V (X) Change ( ) Addition

 Name:
 TYRELL, DAVID
 Name:
 KRAUZE, THERESA

 Address:
 200 121ST AVE. W. UNIT 202
 Address:
 200 121ST AVE. W. UNIT 104

City-St-Zip: ST. PETE BEACH, FL 33736 City-St-Zip: ST. PETE BEACH, FL 33736

Title: DP ( ) Delete Title: S (X) Change ( ) Addition Name: PEGGS, LARRY Name: TYRRELL, DAVID

Address: 200 121ST AVE UNIT 403 Address: 200 121ST AVE UNIT 202
City-St-Zip: SAINT PETERSBURG, FL 33706 City-St-Zip: SAINT PETERSBURG, FL 33706

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BROWN, TALMADGE
 Name:

 Address:
 200 121ST AVE. W. UNIT 304
 Address:

 City-St-Zip:
 TREASURE ISLAND, FL 33706
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID TYRRELL S 03/29/2007