FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 20 1997 8:00am
Secretary of State

DOCUMENT # P94000008440 (7)

1. Corporation Name
MARINA POINT TAMPA DEVELOPMENTS, INC.

Principal Place of Business	Mailing Address
277 N. COLLIER BLVD. 2ND FLOOR MARCO ISLAND FL 33937	277 N. COLLIER BLVD. 2ND FLOOR MARCO ISLAND FL 34145-3033

3. Date Incorporated or Qualified: 02/03/1994
3a. Date of Last Report: 02/13/1996
4. FEI Number: 65-0489066 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 870 BALD EAGLE DR	26 870 BALD EAGLE DR
Suite, Apt #, etc. 22 1B	Suite, Apt #, etc. 27 1B
City & State 23 MARCO ISL FL	City & State 28 MARCO ISL FL
Zip 24 34145 Country 25 USA	Zip 29 34145 Country 30 USA

9. Name and Address of Current Registered Agent

REINDERS, JAMES M
277 N. COLLIER BLVD.
2ND FLOOR
MARCO ISLAND FL 33937

10. Name and Address of New Registered Agent

81 Name: REINDERS, JAMES M.
82 Street Address (P.O. Box Number is Not Acceptable): 870 BALD EAGLE DRIVE
83 STE 1B
84 City: MARCO ISL FL 85 Zip Code: 34145

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE [signature] JAMES M. REINDERS DATE 3/17/97

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSD ☐ DELETE	1.1 TITLE ☑ Change ☐ Addition
NAME	RENDERS, JAMES M	1.2 NAME
STREET ADDRESS	277 N. COLLIER BLVD.	1.3 STREET ADDRESS 870 BALD EAGLE DR # 1B
CITY-ST-ZIP	MARCO ISLAND FL	1.4 CITY-ST-ZIP MARCO ISL FL 34145
TITLE	VPTD ☐ DELETE	2.1 TITLE ☑ Change ☐ Addition
NAME	WILLIAM F. SNYDER	2.2 NAME
STREET ADDRESS	277 NO. COLLIER BLVD	2.3 STREET ADDRESS 870 BALD EAGLE DR # 1B
CITY-ST-ZIP	MARCO ISL FL	2.4 CITY-ST-ZIP MARCO ISL FL 34145
TITLE	☐ DELETE	3.1 TITLE ☐ Change ☐ Addition
NAME		3.2 NAME
STREET ADDRESS		3.3 STREET ADDRESS
CITY-ST-ZIP		3.4 CITY-ST-ZIP
TITLE	☐ DELETE	4.1 TITLE ☐ Change ☐ Addition
NAME		4.2 NAME
STREET ADDRESS		4.3 STREET ADDRESS
CITY-ST-ZIP		4.4 CITY-ST-ZIP
TITLE	☐ DELETE	5.1 TITLE ☐ Change ☐ Addition
NAME		5.2 NAME
STREET ADDRESS		5.3 STREET ADDRESS
CITY-ST-ZIP		5.4 CITY-ST-ZIP
TITLE	☐ DELETE	6.1 TITLE ☐ Change ☐ Addition
NAME		6.2 NAME
STREET ADDRESS		6.3 STREET ADDRESS
CITY-ST-ZIP		6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] JAMES M. REINDERS PRESIDENT 3/17/97 941 389 1110

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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