

FILED  
Jun 11, 2002 8:00 am  
Secretary of State

06-11-2002 90393 034 \*\*\*150.00

## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000080352

1. Entity Name

MARINA APARTMENTS, INC.



Principal Place of Business

P.O. BOX 85

WEST PALM BEACH FL 33402

Mailing Address

P.O. BOX 85

WEST PALM BEACH FL 33402

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0530131

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOHNSON, SCOTT A

505 S. FLAGLER DR.

STE #1010

WEST PALM BEACH FL 33401

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE | NAME                   | STREET ADDRESS              | CITY-ST-ZIP              | TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP |
|-------|------------------------|-----------------------------|--------------------------|-------|------|----------------|-------------|
| P     | JOHNSON, RICHARD S JR. | 505 S FLAGLER DR SUITE 1010 | WEST PALM BEACH FL 33401 |       |      |                |             |
| VS    | JOHNSON, SCOTT A       | 505 S FLAGLER DR SUITE 1010 | WEST PALM BEACH FL       |       |      |                |             |
| T     | KOENIG, PATRICK        | 505 S FLAGLER DR SUITE 1010 | WEST PALM BEACH FL 33401 |       |      |                |             |
|       |                        |                             |                          |       |      |                |             |
|       |                        |                             |                          |       |      |                |             |
|       |                        |                             |                          |       |      |                |             |
|       |                        |                             |                          |       |      |                |             |

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/02

Date

Daytime Phone #

CR2E034 (9/01)