

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 10:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S35441**

1. Corporation Name

MARINA POINT Development, Corp

Principal Place of Business

Mailing Address

6600 SE Harbor Circle
Stuart, Florida

6600 SE Harbor Cr.
Stuart, Fl. 34996

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

3. Date Incorporated or Qualified

3a. Date of Last Report

03/04/1991

04/26/1994

4. FEI Number

Applied For

65-0248508

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

O'Grady, DONALD
2885 SE DUNE DR
Stuart, Fl. 34996

81 Name

Housman, RAMONA

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

6600 SE Harbor Circle

83

84 City

Stuart

FL

85

Zip Code

34996

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 RAMONA Housman, Director Ramona Housman 04/30/95
Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME Housman, DONALD
STREET ADDRESS 6600 SE Harbor Circle
CITY - ST - ZIP Stuart, Florida 34996

TITLE D
NAME Housman, RAMONA
STREET ADDRESS 6600 SE Harbor Circle
CITY - ST - ZIP Stuart, Florida 34996

TITLE D
NAME O'Grady, SUSAN
STREET ADDRESS P.O. Box 382 (N/A)
CITY - ST - ZIP Stuart, Florida 34995

TITLE D
NAME O'Grady, DONALD
STREET ADDRESS P.O. Box 382 (N/A)
CITY - ST - ZIP Stuart, Florida 34995

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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REMITTED BY MAY 1

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: RAMONA Housman, Director Ramona Housman 4/30/95
Signature and typed or printed name of signing officer or director Date

407-225-4120