

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718918

Entity Name: MARLIN APARTMENTS CONDOMINIUM, INC.**Current Principal Place of Business:**22 TULIP AVENUE APT. 311
COCOA BEACH, FL 32931**Current Mailing Address:**22 TULIP AVENUE APT. 311
COCOA BEACH, FL 32931**FEI Number: 59-1402146****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MACDONALD, CINDY J
22 TULIP AVENUE
311
COCOA BEACH, FL 32931 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**Officer/Director Detail :**Title PRESIDENT
Name CHRISTENSEN, CHRIS
Address 2650 W SENECA TPKE
City-State-Zip: MARCELLUS NY 13108Title SEC/TREA
Name STORM, SHIRLEY
Address 903 LEVITT PKWY
City-State-Zip: ROCKLEDGE FL 32955Title DIRECTOR
Name MCNAMARA, DAVID
Address 3018 CLEMWOOD DR
City-State-Zip: ORLANDO FL 32803Title VP
Name WAGNER, STEVE
Address 1049 STONE DOWN LN
City-State-Zip: MATTHEWS NC 28104Title DIRECTOR
Name PERRY, BRIAN
Address 1301 DELAWARE AVE SW N 106
City-State-Zip: WASHINGTON DC 20024

I hereby 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 all other like empowered.

SIGNATURE: SHIRLEY STORM**SEC/TREAS****01/17/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date