2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002378

Entity Name: MARBELLA CONDOMINIUM OWNERS ASSOCIATION, INC.

FILED Apr 26, 2024 Secretary of State 5025033860CC

Current Principal Place of Business:

RDF ASSOCIATES 130 STAFF DR. NE

FORT WALTON BEACH, FL 32548

Current Mailing Address:

RDF ASSOCIATES 130 STAFF DR. NE

FORT WALTON BEACH, FL 32548 US

FEI Number: 20-4466082 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RDF ASSOCIATES, INC. RDF ASSOCIATES 130 STAFF DR. NE

FORT WALTON BEACH, FL 32548 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: KRISTEN SMITH 04/26/2024

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title

Name HINES, LARRY Name KNELLINGER, BUSTER

RDF ASSOCIATES Address Address RDF ASSOCIATES

130 STAFF DR. NE 130 STAFF DR. NE

City-State-Zip: FORT WALTON BEACH FL 32548 City-State-Zip: FORT WALTON BEACH FL 32548

Title **SECRETARY** Title D

Name FLYNN, DAN Name PAGET, ALFRED

Address RDF ASSOCIATES Address RDF ASSOCIATES 130 STAFF DR. NE 130 STAFF DR. NE

City-State-Zip: FORT WALTON BEACH FL 32548 City-State-Zip: FORT WALTON BEACH FL 32548

Title DIRECTOR Title DIRECTOR

FORD, JOHNNIE Name MERIJANIAN, JOHN Name Address **RDF ASSOCIATES** Address **RDF ASSOCIATES**

130 STAFF DR. NE 130 STAFF DR. NE

City-State-Zip: FORT WALTON BEACH FL 32548 City-State-Zip: FORT WALTON BEACH FL 32548

Title Т Title MGR

Name GOOLSBY, JOHN Name WOLVERTON, CHARLOTTE

Address **RDF ASSOCIATES** Address **RDF ASSOCIATES**

130 STAFF DR. NE 130 STAFF DR. NE

FORT WALTON BEACH FL 32548 FORT WALTON BEACH FL 32548 City-State-Zip: City-State-Zip:

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.

04/26/2024 SIGNATURE: CHARLOTTE WOLVERTON **MGR**