

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 10 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 724525 (1)
1. Corporation Name
MARINER CAY PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address
3901 SE ST. LUCIE BLVD STUART FL 34997
3901 SE ST. LUCIE BLVD STUART FL 34997-6176

3. Date Incorporated or Qualified 10/12/1972
3a. Date of Last Report 04/12/1996

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 25 29 30

4. FEI Number 59-1478387 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

9. Name and Address of Current Registered Agent
HOLMAN, JOYCE E
2171 SE STONECROP
PT ST LUCIE FL 34984

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE *Joyce E. Holman* Joyce E. Holman 4/3/97
Signed, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent's signature required with change.) DATE

12. OFFICERS AND DIRECTORS	
TITLE	TD DELETE
NAME	BLACKMORE, GERALD
STREET ADDRESS	3901 SE ST LUCIE BLVD
CITY-ST-ZIP	STUART FL
TITLE	VD <input type="checkbox"/> DELETE
NAME	TJETJE, EMIL D.
STREET ADDRESS	3901 SW ST LUCIE BLVD
CITY-ST-ZIP	STUART FL
TITLE	SD DELETE
NAME	MEYER, JOSEPH
STREET ADDRESS	3901 S.E. ST. LUCIE BLVD.
CITY-ST-ZIP	STUART, FL 00000
TITLE	PD DELETE
NAME	WAUGH, JAMES
STREET ADDRESS	3901 SE ST LUCIE BLVD
CITY-ST-ZIP	STUART FL
TITLE	D DELETE
NAME	EWELL, NANCY
STREET ADDRESS	3901 S.E. ST. LUCIE BLVD.
CITY-ST-ZIP	STUART, FL 00000
TITLE	D DELETE
NAME	HILLEGAS, DAVE
STREET ADDRESS	3901 SW ST LUCIE BLVD
CITY-ST-ZIP	STUART FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	TD Childers, James <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Childers, James
1.3 STREET ADDRESS	3901 SE St. Lucie Blvd.
1.4 CITY-ST-ZIP	Stuart, Fl 34997
2.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Tietje, Emil D.
2.3 STREET ADDRESS	3901 SE St. Lucie Blvd.
2.4 CITY-ST-ZIP	Stuart, FL 34997
3.1 TITLE	SD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Taubel, David
3.3 STREET ADDRESS	3901 SE St. Lucie Blvd.
3.4 CITY-ST-ZIP	Stuart, FL 34997
4.1 TITLE	VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Baker, Grant
4.3 STREET ADDRESS	3901 SE St. Luice Blvd.
4.4 CITY-ST-ZIP	Stuart, FL 34997
5.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Eugene Way
5.3 STREET ADDRESS	3901 SE St. Lucie Blvd.
5.4 CITY-ST-ZIP	Stuart, FL 34997
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.
Eugene Way
4/3/97

CR2E037 (9/96)