

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730237

FILED
Apr 26, 2006
Secretary of State

Entity Name: MARINER'S WALK ASSOCIATION, INC.

Current Principal Place of Business:

463499 STATE ROAD 200
YULEE, FL 32097 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 1987
YULEE, FL 320971987 US

New Mailing Address:

FEI Number: 52-1046212 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWELL, TERRELL J
463499 STATE ROAD 200
YULEE, FL 32097 US

Name and Address of New Registered Agent:

PROPERTY MANAGEMENT SYSTEMS INC
463499 STATE ROAD 200
YULEE, FL 32097 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: TERRELL J POWELL

04/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: DEAN, LARRY
Address: 1768 MARINERS WALK
City-St-Zip: FERNANDINA BCH., FL 32034 US

Title: D () Delete
Name: MURPHY, ELEANOR
Address: 1774 MARINERS WALK
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: STD () Delete
Name: SLOAN, MARIE
Address: 1795 MARINERS WALK
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D () Delete
Name: NEAL, ASHLEY
Address: 1784 MARINERS WALK
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: PD () Delete
Name: OSBORNE, ROBERT
Address: 1778 MARINERS WALK
City-St-Zip: FERNANDINA BEACH, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: CHARLTON, IAN
Address: 1777 MARINERS WALK
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT OSBORNE

P

04/26/2006

Electronic Signature of Signing Officer or Director

Date