

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N03630

1. Entity Name

MARINER'S LIGHT CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 17, 2000 8:00 am**  
**Secretary of State**

04-17-2000 90134 029 \*\*\*\*61.25

Principal Place of Business

Mailing Address

16332 GULF BREEZE BLVD.  
REDINGTON BEACH FL 33708  
US

10825 SEMINOLE BLVD.  
#1  
LARGO FL 33778-3337  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2646837

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required



DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

## 7. Name and Address of New Registered Agent

KAPPER, THOMAS W.  
C/O KAPPER, THOMAS W.  
10825 SEMINOLE BLVD #1  
LARGO FL 33708

Name

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

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Department of State**

## 10. OFFICERS AND DIRECTORS

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete  
NAME DS  
STREET ADDRESS PEARSON, ALYNE  
CITY-ST-ZIP 16332 GULF BLVD #4B  
REDINGTON BCH FL 33708

TITLE ☒ Change ☐ Addition  
NAME Alex Wislow  
STREET ADDRESS 16332 Gulf Blvd.  
CITY-ST-ZIP Redington Beach, Fl 33708

TITLE ☐ Delete  
NAME DPT  
STREET ADDRESS SHEPHERD, CHARLES  
CITY-ST-ZIP 16332 GULF BLVD UNIT 2A  
REDINGTON BCH FL 33708

TITLE ☒ Change ☐ Addition  
NAME DVP  
STREET ADDRESS Richard Bury  
CITY-ST-ZIP 16332 Gulf Blvd. Redington Bch, Fl

TITLE ☐ Delete  
NAME DVP  
STREET ADDRESS SCHALLER, BILL  
CITY-ST-ZIP 16332 GULF BLVD, #1B  
REDINGTON BEACH FL 33708

TITLE ☐ Change ☐ Addition  
NAME DTS  
STREET ADDRESS William Nolls  
CITY-ST-ZIP 16332 Gulf Blvd.,  
Redington Beach, Fl 33708

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)