

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N09907** (9)

1. Corporation Name

MARINER'S WAY ASSOCIATION, INC.



Principal Place of Business

800 MERINERS WAY
ONE CLEARLAKE CENTRE, SUITE 1010
BOYNTON BCH FL 33435
US

Mailing Address

P O BOX 660
ONE CLEARLAKE CENTRE, SUITE 1010
BOYNTON BCH FL 33425
US

3. Date Incorporated or Qualified
06/24/1985

3a. Date of Last Report
04/17/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

33444

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MICHAEL J GELFAND
ONE CLEARLAKE CENTER SUITE 1010
250 SOUTH AUSTRALIAN AVE
WEST PALM BEACH FL 33401

81

Name

82

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

83

84

City

DEARAT BEACH

FL

85

Zip Code

33444

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

Michael J Gelfand
Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3-15-96

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	GROSSHANTEN, ERNEST	
STREET ADDRESS	752 MARINERS WAY	
CITY - ST - ZIP	BOYNTON BEACH FL	
TITLE	PD	DELETE
NAME	FALTERER	
STREET ADDRESS	724 MARINERS WAY	
CITY - ST - ZIP	BOYNTON BEACH FL	
TITLE	VD	DELETE
NAME	PULEO, JOSEPH R	
STREET ADDRESS	720 MARINERS WAY	
CITY - ST - ZIP	BOYNTON BEACH FL	
TITLE	TD	DELETE
NAME	GREENWOOD, TAMARA	
STREET ADDRESS	736 MARINERS WAY	
CITY - ST - ZIP	BOYNTON BEACH FL	
TITLE	D	DELETE
NAME	JOSLIN, DAN	
STREET ADDRESS	760 MARINERS WAY	
CITY - ST - ZIP	BOYNTON BEACH FL	
TITLE	SD	DELETE
NAME	NARDUCCI, DAVID	
STREET ADDRESS	658 MARINERS WAY	
CITY - ST - ZIP	BOYNTON BEACH FL	

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DV	Change	Addition
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY - ST - ZIP			
2.1 TITLE		Change	Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY - ST - ZIP			
3.1 TITLE	DT	Change	Addition
3.2 NAME	CHARLIE SONNS		
3.3 STREET ADDRESS	728 MARINERS WAY		
3.4 CITY - ST - ZIP	BOYNTON BEACH FL		
4.1 TITLE	DS	Change	Addition
4.2 NAME	ROBIN HEMMINGWAY		
4.3 STREET ADDRESS	610 MARINERS WAY		
4.4 CITY - ST - ZIP	BOYNTON BEACH FL		
5.1 TITLE		Change	Addition
5.2 NAME	John Morrison		
5.3 STREET ADDRESS	716 Mariners Way		
5.4 CITY - ST - ZIP	Boynton Beach, FL		
6.1 TITLE		Change	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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Christian Salter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Christian Salter, President

3/23/96

407-364-7759

Date

Daytime Phone

CR2E037 (12/95)