## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 02, 2005 8:00 am Secretary of State

DOCUMENT # N45769  1. Entity Name MARINER VILLAGE PROPERTY OWNERS, INC.				03-02-200	5 90071 005 ****61.25	
5200 SE DEVENWOOD WAY PO I		Mailing Address PO BOX 2567 STUART, FL 34995 US			III. BIIBN BIIBN BIBN BIBN BIBN BIBN BI INGA	
2. Principal Place of Business 3. Ma		3. Mailing Address	Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		CR2E037 (10/03)	
City & State		City & State	City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Current F	legistered Agent		7. Name and Address of New I	Registered Agent	
CORNETT, JANE L				<u> </u>		
CORNETT GOOGE & ASSOCIATES P.A. 401 E OSCEOLA ST			Street Addres	Street Address (P.O. Box Number is Not Acceptable)		
STUART, FL 34994						
			City	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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE						
Filing Fee is \$61.25  Due by May 1, 2005  9. Election Campa Trust Fund Con				40.00 mg/ by propagation 40	Make check payable to rida Department of State	
10.	OFFICERS AND DIR	CTORS	11.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 10	
TITLE NAME	P IVERS, RAYMOND	Delete Delete	TITLE D	ILESDIE RADRAP	☐ Change ★ Addition	
STREET ADDRESS	7240 SE MAGELLAN LANE		NAME GI	LLESPIE, BARBARI 3C 3G MIZNER PL	A C E	
CATY-ST-ZIP	STUART, FL 34997	ŀ		UART, FL 34997		
TITLE	V	Delete	TITLE V	<del></del>	☐ Change <b>X</b> Addition	
NAME	RICCA, DEBBIE		NAME CO	HEN, NORMAN	• •	
STREET ADDRESS CITY-ST-ZIP	5000 SE MARINER VILLAGE LAN	IE .		97 SE SEAGRTE LA		
TITLE	STUART, FL 34997	7		UART, FL 34997		
NAME	AMLONEY, JERRY	Delete	TITLE T	UNO, ALFRED	☐ Change ★ Addition	
STREET ADDRESS	7160 SE SEAGATE LANE		STREET ADDRESS	32 SE MARINER V	ILLAGE LANE	
CITY-ST-ZIP	STUART, FL 34997			VART, FL 34997		
TITLE	D	☐ Delete	TITLE \$	, <u></u>	Change Addition	
NAME STREET ADDRESS	ACHENBACH, TRUDY   5004 SE MARINER VILLAGE LAN		NAME STREET ADDRESS			
CITY-ST-ZIP	STUART, FL 34997		STREET ADDRESS CITY-ST-ZIP	•		
TITLE	D	Delete	TITLE 70		☐ Change ★Addition	
NAME	WALCZAK, LARRY	) Distort	NAME 50	HNSTON, HEATHL	onunge Addition	
STREET ADDRESS	7221 MAGELLAN LANE		STREET ADDRESS 49	HNSTON, HEATHE	D MAY	
CITY-ST-ZIP	STUART, FL 34997			UART, FL 3499		
TITLE NAME		☐ Delete	TITLE D	· · · · · · · · · · · · · · · · · · ·	☐ Change Addition	
1			NAME LATE	V#0 T00401M		
STREET ADDRESS			NAME HE	YER, TOACHIM 25 SF MAGELLA	A LAUF	
CITY-ST-ZIP	certify that the information supplied with	<u>.                                    </u>	STREET ADDRESS 72 CITY-ST-ZIP 57	125 SE MAGELLA VART, FL 3499	7	

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: RAYMOND IVERS //31/05 772-220-3057