2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2009
Secretary of State

DOCUMENT# N45769

Entity Name: MARINER VILLAGE PROPERTY OWNERS, INC.

Current Principal Place of Business:

5200 SE DEVENWOOD WAY
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2567
STUART, FL 34995 US

New Mailing Address:

FEI Number: 65-0990447 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORNETT, JANE L
CORNETT GOOGE & ASSOCIATES P.A.
401 E OSCEOLA ST
STUART, FL 34994 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	V	( ) Delete
Name:	DADARIO, LAUREN	
Address:	4728 SW MIZNER PL	
City-St-Zip:	STUART, FL 34997	
Title:	PD	( ) Delete
Name:	COHEN, NORMAN	
Address:	7197 SE SEAGATE LANE	
City-St-Zip:	STUART, FL 34997	
Title:	T	( ) Delete
Name:	BRUNO, ALFRED	
Address:	4832 SE MARINER VILLAGE LANE	
City-St-Zip:	STUART, FL 34997	
Title:	D	( ) Delete
Name:	DOUGHERTY, DAN	
Address:	4862 SE DEURNWOOD WAY	
City-St-Zip:	STUART, FL 34997	
Title:	D	( ) Delete
Name:	CASTELLANO, ROBERT	
Address:	4940 SE MARINER VILLAGE LN.	
City-St-Zip:	STUART, FL 34997	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	D	(X) Change ( ) Addition
Name:	DADARIO, LAUREN	
Address:	4728 SW MIZNER PL	
City-St-Zip:	STUART, FL 34997	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	SD	(X) Change ( ) Addition
Name:	ACHENBACH, TRUDY	
Address:	5004 SE MARINER VILLAGE LANE	
City-St-Zip:	STUART, FL 34997	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VPD	( ) Change (X) Addition
Name:	CASTELLI, SAL	
Address:	4839 SE MARINER VILLAGE LANE	
City-St-Zip:	STUART, FL 34997	

I hereby certify that the information supplied with this filing does not qualify 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: NORMAN COHEN PD 01/09/2009

Electronic Signature of Signing Officer or Director — Date