2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724525

Entity Name: MARINER CAY PROPERTY OWNERS ASSOCIATION, INC.

FILED
Apr 21, 2021
Secretary of State
5280959201CC

Current Principal Place of Business:

1111 SE FEDERAL HWY., #100 STUART. FL 34994

Current Mailing Address:

1111SE FEDERAL HWY.,#100 STUART. FL 34994 US

FEI Number: 59-1478387 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ADVANTAGE PROPERTY MANAGEMENT 1111SE FEDERAL HWY.,#100 STUART, FL 34994 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: BARBARA SHEA 04/21/2021

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRESIDENT Title VP

Name RICE, TOM Name CONNELLY, JOHN

Address 1111 SE FEDERAL HWY., #100 Address 1111 SE FEDERAL HWY., #100

City-State-Zip: STUART FL 34994 City-State-Zip: STUART FL 34994

TitleTREASURERTitleSECRETARYNameVANAS, ROBERTNameCOURY, KATHY

Address 1111 SE FEDERAL HWY., #100 Address 1111 SE FEDERAL HWY., #100

City-State-Zip: STUART FL 34994 City-State-Zip: STUART FL 34994

Title DIRECTOR Title DIRECTOR

Name BOYLE, TOM Name GREGORY, JEFFREY

Address 1111 SE FEDERAL HWY., #100 Address 1111 SE FEDERAL HWY., #100

City-State-Zip: STUART FL 34994 City-State-Zip: STUART FL 34994

Title DIRECTOR Title DIRECTOR

Name TOEBE, JOHN Name VAN DELLEN, ROBERT

Address 1111 SE FEDERAL HWY., #100 Address 1111 SE FEDERAL HWY., #100

City-State-Zip: STUART FL 34994 City-State-Zip: STUART FL 34994

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I hereby 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 all other like empowered.

SIGNATURE: TOM RICE PRESIDENT 04/21/2021

Electronic Signature of Signing Officer/Director Detail

Date

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name LUCE, SUSIE Name BYSTROM, DAVID

Address 1111 SE FEDERAL HWY., #100 Address 1111 SE FEDERAL HWY., #100

City-State-Zip: STUART FL 34994 City-State-Zip: STUART FL 34994