		40
above, or on an attachment with all other like empowered.		
oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this rep	port as required by Chapter 617, Florida Statutes; and that my name appear	'S
I hereby certify that the information indicated on this report or supplemental report is true and accurate and the	at my electronic signature shall have the same legal effect as if made under	

L

PRESIDENT

03/02/2016

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### **DOCUMENT# 757626**

Entity Name: MARINER VILLAGE-TARPON COVE COMMUNITY ASSOCIATION, INC.

## **Current Principal Place of Business:**

1531 W. KLOSTERMAN RD. TARPON SPRINGS, FL 34689

## **Current Mailing Address:**

1531 W. KLOSTERMAN RD. TARPON SPRINGS, FL 34689

# FEI Number: 59-2171067

## Name and Address of Current Registered Agent:

ASSOCIATION MANAGER 1531 W. KLOSTERMAN RD. TARPON SPRINGS, FL 34698 US Certificate of Status Desired: No

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	NATURE: DEBRA SHORT		03/02/2016				
	Electronic Signature of Registered Agent			Date			
Officer/Director Detail :							
Title	Т	Title	D				
Name	MCINTOSH, ROBERT	Name	FREUDENRICH, JANET				
Address	1815 MARINER DR. 169	Address	1531 W. KLOSTERMAN RD.				
City-State-Zip:	TARPON SPRINGS FL 34689	City-State-Zip:	TARPON SPRINGS FL 34689				
Title	VP	Title	Ρ				
Name	SASSO, LAWRENCE	Name	BLYTH, KEN				
Address	123 MARINER DR	Address	1801 MARINER DR. #20				
City-State-Zip:	TARPON SPRINGS FL 34689	City-State-Zip:	TARPON SPRINGS FL 34689				
Title	S						
Name	LOCIACONO, BENJAMIN						
Address	401 MARINER DR						
City-State-Zip:	TARPON SPRINGS FL 34689						

Electronic Signature of Signing Officer/Director Detail

FILED Mar 02, 2016 Secretary of State CC0849851729