

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00005

**Entity Name:** THE MARINER VILLAGE COMMUNITY ASSOCIATION INC.

**Current Principal Place of Business:**

1145 SAWGRASS CORPORATE PARKWAY  
SUNRISE, FL 33323

**Current Mailing Address:**

1145 SAWGRASS CORPORATE PARKWAY  
SUNRISE, FL 33323 US

**FEI Number:** 59-2513712

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ASSOCIATION LAW GROUP, P.L.  
511 SE 5TH AVENUE  
SUITE R010  
FORT LAUDERDALE, FL 33301 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:** RAMON C. PALACIO, ESQ.

02/21/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name STEELMAN, MARCIA  
Address 1145 SAWGRASS CORPORATE  
PARKWAY  
City-State-Zip: SUNRISE FL 33323

Title SECRETARY  
Name MUNOZ, MARIA  
Address 1145 SAWGRASS CORPORATE  
PARKWAY  
City-State-Zip: SUNRISE FL 33323

Title TREASURER  
Name ARNA, ZIV  
Address 1145 SAWGRASS CORPORATE  
PARKWAY  
City-State-Zip: SUNRISE FL 33323

Title PRESIDENT  
Name YOSEFI, GIL  
Address 1145 SAWGRASS CORPORATE  
PARKWAY  
City-State-Zip: SUNRISE FL 33323

Title VP  
Name ORTEGA, LEOPOLDO  
Address 1145 SAWGRASS CORPORATE  
PARKWAY  
City-State-Zip: SUNRISE FL 33323

*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:** GIL YOSEFI

PRESIDENT

02/21/2023

Electronic Signature of Signing Officer/Director Detail

Date