2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06511

Entity Name: MARINER VILLAGE GARDEN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

11784 WEST SAMPLE ROAD SUITE 103 CORAL SPRINGS, FL 33065

Current Mailing Address:

11784 WEST SAMPLE ROAD **SUITE 103** CORAL SPRINGS, FL 33065 US

FEI Number: 59-2517293

Name and Address of Current Registered Agent:

UNITED COMMUNITY MANAGEMENT CORP. 11784 WEST SAMPLE ROAD SUITE 103 CORAL SPRINGS, FL 33065 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	т	Title	S
Name	TICKNER, GUY	Name	LOWEN, JEROME
Address	11784 WEST SAMPLE ROAD SUITE 103	Address	11784 WEST SAMPLE ROAD SUITE 103
City-State-Zip:	CORAL SPRINGS FL 33065	City-State-Zip:	CORAL SPRINGS FL 33065
Title	P	Title	VP
Name	CARR, JED	Name	FEIN, LORI
Address	11784 WEST SAMPLE ROAD SUITE 103	Address	11784 WEST SAMPLE ROAD SUITE 103
City-State-Zip:	CORAL SPRINGS FL 33065	City-State-Zip:	CORAL SPRINGS FL 33065
Title	D	Title	D
Title Name	D HOENIG, GUY	Title Name	D SAPIR, SHALOM
	-		-
Name	HOENIG, GUY 11784 WEST SAMPLE ROAD SUITE 103	Name	SAPIR, SHALOM 11784 WEST SAMPLE ROAD SUITE 103
Name Address	HOENIG, GUY 11784 WEST SAMPLE ROAD SUITE 103	Name Address	SAPIR, SHALOM 11784 WEST SAMPLE ROAD SUITE 103
Name Address City-State-Zip:	HOENIG, GUY 11784 WEST SAMPLE ROAD SUITE 103 CORAL SPRINGS FL 33065	Name Address	SAPIR, SHALOM 11784 WEST SAMPLE ROAD SUITE 103
Name Address City-State-Zip: Title	HOENIG, GUY 11784 WEST SAMPLE ROAD SUITE 103 CORAL SPRINGS FL 33065 D	Name Address	SAPIR, SHALOM 11784 WEST SAMPLE ROAD SUITE 103

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: JEDD CARR

Ρ

03/30/2016 Date

Date

FILED Mar 30, 2016 Secretary of State CC6837885375