

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20887

**Entity Name:** MARINER'S COVE MARINA OWNERS ASSOCIATION, INC.

**FILED**  
**Feb 02, 2020**  
**Secretary of State**  
**2607831271CC**

**Current Principal Place of Business:**

2389 TREASURE ISLE DR  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

7260 WEST OAKLAND PARK BLVD  
LAUDERHILL, FL 33313 US

**FEI Number: 59-2840913**

**Certificate of Status Desired: No**

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

JEFFREY REMBAUM P.A.  
9121 NORTH MILITARY TRAIL  
SUITE 200  
PALM BEACH GARDENS, FL 33410 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: JEFFREY REMBAUM**

**02/02/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name POLSON, DAVID A  
Address 2379 TREASURE ISLES DRIVE, A24  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title PRESIDENT  
Name JOKELA, ESA  
Address 2400 TREASURE ISLE DR SUITE A-76  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR  
Name SLAMOWITZ, STEVE  
Address 2359 TREASURE ISLE DRIVE  
A-38  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title VP  
Name CSENZA, ROBERT  
Address 2359 TREASURE ISLE DRIVE # A-30  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title SECRETARY  
Name KOCHER, SHERI  
Address 2320 TREASURE ISLE DRIVE A-73  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title TREASURER  
Name FARBER, GINNY  
Address 2379 TREASURE ISLE DRIVE A-17  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR  
Name KIRMS, HARRY  
Address 2319 TREASURE ISLE DRIVE  
UNIT A-2319  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR  
Name SORENSON, NEAL  
Address 2279 TREASURE ISLE DRIVE  
UNIT A-61  
City-State-Zip: PALM BEACH GARDENS FL 33410

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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: ESA JOKELA**

**PRESIDENT**

**02/02/2020**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            EMERY, WILLIAM  
Address        2379 TREASURE ISLE DRIVE  
                  UNIT A-28  
City-State-Zip: PALM BEACH GARDENS FL 33410