## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000065549

Entity Name: MARINER FINANCE FLORIDA, INC.

**Current Principal Place of Business:** 

8211 TOWN CENTER DR NOTTINGHAM, MD 21236

**Current Mailing Address:** 

P.O. BOX 44850

BALTIMORE, MD 21236 US

FEI Number: 57-1055328 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent

Date

**FILED** Mar 04, 2016

**Secretary of State** 

CC0700952989

Officer/Director Detail:

Title Title **SEVP** 

JOHNSON, JOSHUA Name FRANKLE, SCOTT Name

8211 TOWN CENTER DR Address 8211 TOWN CENTER DR Address City-State-Zip: NOTTINGHAM MD 21236 NOTTINGHAM MD 21236 City-State-Zip:

Title **SEVP** Title D

Name KLAPASKA, BONNIE FRANKLE, SCOTT Name

Address 8211 TOWN CENTER DR Address 8211 TOWN CENTER DR NOTTINGHAM MD 21236 City-State-Zip:

Title STD

City-State-Zip:

KLAPASKA, BONNIE Name 8211 TOWN CENTER DR Address City-State-Zip: NOTTINGHAM MD 21236

NOTTINGHAM MD 21236

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SCOTT FRANKLE

Electronic Signature of Signing Officer/Director Detail

SEVP/CAO

03/04/2016

Date