

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000065549

**FILED**  
**Apr 23, 2015**  
**Secretary of State**  
**CC7905830258**

**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

**Officer/Director Detail :**

Title D  
Name BRIDGES, SUSAN A  
Address 181 SECURITY PLACE  
City-State-Zip: SPARTANBURG SC 29307

Title D  
Name BARR, VIC  
Address 181 SECURITY PLACE  
City-State-Zip: SPARTANBURG SC 29307

Title DIRECTOR  
Name BOLTON, HEIDI P  
Address 181 SECURITY PLACE  
City-State-Zip: SPARTANBURG SC 29307

Title PD  
Name JOHNSON, JOSHUA  
Address 8211 TOWN CENTER DR  
City-State-Zip: NOTTINGHAM MD 21236

Title SEVP  
Name FRANKLE, SCOTT  
Address 8211 TOWN CENTER DR  
City-State-Zip: NOTTINGHAM MD 21236

Title D  
Name FRANKLE, SCOTT  
Address 8211 TOWN CENTER DR  
City-State-Zip: NOTTINGHAM MD 21236

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

Title STD  
Name KLAPASKA, BONNIE  
Address 8211 TOWN CENTER DR  
City-State-Zip: 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:** BONNIE KLAPASKA

**SENIOR EXECUTIVE VICE 04/23/2015**  
**PRESIDENT**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date