FILED Feb 19, 2008 8:00 am Secretary of State

2008 NOT	-FOR-PROFIT CORPORAT	ION
	ANNUAL REPORT	

DOCUMENT # 724525 1. Entity Name MARINER CAY PROPERTY OWNERS ASSOCIATION, INC.						02-19-2008 90018 017 ****61.25					
Principal Place of Business 3901 SE ST. LUCIE BLVD STUART, FL 34997 Mailing Address 3901 SE ST. LUCIE BLVD STUART, FL 34997 Mailing Address 3901 SE ST. LUCIE BLVD STUART, FL 34997				!		1 (88 11): 1 8813 11 8	HI BIRDI B IRDI H I DI MIN	Brail blæn álán fi	1011 BIDS GIDI	II & & 1111	
Principal Place of Business - No P.O. Box # Mailing Address			ing Address	-							
Suite, Apt. #, etc.			Su	Suite, Apt. #, etc.			01172008	Chg-NP	CR2E037	(12/06)	
City & State		Cit	y & State			4. FEI Number 59-14783	387	·		plied For t Applicable	
Zip	Country Zip)	Country		5. Certificate of	Status Desired	□ \$8 Fe	3.75 Add e Require	itional 1	
		and Address of Current	Registere	d Agent	Name		7. Name and Ad	ddress of New R	egistered Age	ent	
MARTINA, LOUIS P JR 3901 SE ST LUCIE BLVD STUART, FL 34997			Street	Street Address (P.O. Box Number is Not Acceptable)							
				City	City FL Zip Code						
8. 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. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE Signature, typod or prigrationems of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
Filing Fee Is \$61.25 9. Election Campaign F Due by May 1, 2008 Trust Fund Contribut							\$5.00 May Be Added to Fees		ake check p	7	L
10.	· · · · · · · · · · · · · · · · · · ·	OFFICERS AND DI	RECTORS		11.	, ,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LUCE, MYRON NA STR. 3901 SE ST LUCIE BLVD.			TITLE NAME STREET ADDRESS CITY-ST-ZIP] Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ł	DRTH, BUD ST. LUCIE BLVD FL 34997		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				C	Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WACKEEN 3901 SE S STUART, I	T LUCIE BLVD	-	Delete .	TITLE NAME STREET ADDRESS CITY-ST-ZIP	- ~		**** <u>* </u>	_ [Change	. Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SESSIONS 3901 SE S STUART, I	T. LUCIE BLVD.		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TO DAY)15, MICHA 14 SE CEL WARE, FL	TEL HERBOARC 94997	I LANE] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	BRO 390	DWN, JOAN 1 SE ST. A 1 ABB. FL 3	Lucie Bloc 14997		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	601 990 54	don, Geor 1 SE ST 1 Aet, FL	9E LUCIE BI 34947	ivd # 72	Change	Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.											
SIGNATURE: Detail Desprise Phone of Desprise Ph											

ATTACHMENT

40027560 # 724525 D HOBSON, DOUGLAS 3901 SEST. LUCIE BLVD #49 SHIMBET, FL 34997

D Addition Odgees, Lobert 4083 SE Centerboard Lane Stuart, FL 34997

AddITION

SOLIMINE, Christine

SOLIMINE, Christine

HA90 SE Whit ICAR WAY

SHUART, FL 3499?

Addition

Addition

CIARK, LOWELL CENTERBOARD LANE HARS SE CENTERBOARD LANE SHUART, FL 34997