

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2008 8:00 am
Secretary of State

02-12-2008 90013 009 ****61.25

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1. Entity Name

MARINER'S WATCH CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

3145 N. COASTAL HIGHWAY
ST AUGUSTINE FL 32095-2240

Mailing Address

MARINERS WATCH CONDO ASSN.
1093 A1A BEACH BLVD. PMB 412
SAINT AUGUSTINE FL 32080

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-1798676

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

EBERLING, ROBERT A CPA
1797 OLD MOULTRIE RD., SUITE 107
SAINT AUGUSTINE FL 32084

Name

Street Address (P.O. Box Number is Not Acceptable)-

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, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME MCCALLUM, DIANNE ☐ Delete
STREET ADDRESS 3145 N COASTAL HWY, UNIT 1156
CITY-ST-ZIP SAINT AUGUSTINE FL 32095

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S
NAME FRANK, PHYLLIS ☐ Delete
STREET ADDRESS 3145 N. COASTAL HIGHWAY, UNIT 1148
CITY-ST-ZIP ST AUGUSTINE FL 32095-2240

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP
NAME PARKER, CATHY ☐ Delete
STREET ADDRESS 3145 COASTAL HWY 1140
CITY-ST-ZIP SAINT AUGUSTINE FL 32084

TITLE ☒ Change ☐ Addition
NAME ~~WELDON, ALICE~~
STREET ADDRESS 3145 COASTAL HWY #1132
CITY-ST-ZIP ST. AUG. FL 32084

TITLE T
NAME SEROKA, ELIZABETH ☐ Delete
STREET ADDRESS 3145 COASTAL HWY 1164
CITY-ST-ZIP SAINT AUGUSTINE FL 32084

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME SYKES, ROBERT ☐ Delete
STREET ADDRESS 3145 N COASTAL HWY, UNIT 1130
CITY-ST-ZIP SAINT AUGUSTINE FL 32095

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME LARRSON, STEN ☐ Delete
STREET ADDRESS 3145 N. COASTAL HWY #1108
CITY-ST-ZIP SAINT AUGUSTINE FL 32095

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Elizabeth Seroka (Treasurer)

02-04-08