

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726484

FILED
Mar 28, 2012
Secretary of State

Entity Name: MARINER POINTE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O ISLAND MANAGEMENT
711 TARPON BAY ROAD
SANIBEL, FL 33957

New Principal Place of Business:

Current Mailing Address:

C/O ISLAND MANAGEMENT
PO BOX 100
SANIBEL, FL 33957

New Mailing Address:

FEI Number: 59-1580063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACKESY, STEVEN
C/O ISLAND MANAGEMENT
711 TARPON BAY ROAD
SANIBEL, FL 33957 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: SETTANNI, THOMAS
Address: 760 SEXTANT DR # 942
City-St-Zip: SANIBEL, FL 33957

Title: TD
Name: NIXON, RONALD
Address: 1378 CALENDONIA CIRCLE
City-St-Zip: LOUISVILLE, CO 80027

Title: VD
Name: MCBROOM, JOHN
Address: 315 NORTH 7315 HWY 83
City-St-Zip: HARTLAND, WI 53029

Title: SD
Name: HAITT, FRANK
Address: 10809 SEASCAPE COURT
City-St-Zip: INDIANAPOLIS, IN 46256

Title: D
Name: REICH, DIANNE D
Address: 61 PLEASANT ST
City-St-Zip: MARBLEHEAD, MA 01945

Title: D
Name: PODER, JOE
Address: 17 BALSAM RIDGE CIRCLE
City-St-Zip: WALLINGSFORD, CT 06492

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: THOMAS SETTANNI

PD

03/28/2012

Electronic Signature of Signing Officer or Director

Date