

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 15, 2000 8:00 am
Secretary of State

02-15-2000 90020 032 ****61.25

DOCUMENT # 743840

1. Entity Name

MARINER SANDS PROPERTY OWNERS ASSOCIATION, INC.

CO



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

6500 MARINER SANDS DRIVE
 STUART FL 34997

6500 MARINER SANDS DRIVE
 STUART FL 34997-8723

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2147192

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SCHOCK, FREDERICK F
6500 MARINER SANDS DRIVE
STUART FL 34997

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEES IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FYLER, ANSON 6461 WINGED FOOT DR STUART FL 34997	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRUNETTE, GENE 5111 BRANDYWINE WAY STUART FL 34997	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CLIFFORD, WILLIAM 5602 FOXCROSS PL STUART FL 34997	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RAUTIO, ARTHUR A 5711 WINGED FOOT DR STUART FL 34997	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BISSELL, HARRY 5122 BRANDYWINE WAY STUART FL 34997	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD STADLER, DONALD A 6864 SE PACIFIC DR STUART FL 34997	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jacobson, Allan 5391 Burning Tree Circle Stuart, FL 34997	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President / Director	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President / Director	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Hazeski Edward 6265 Mariner Sands Drive Stuart FL 34997	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Arthur A. Rautio* **ARTHUR A. RAUTIO** 2/7/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)