

2002 UNIFORM BUSINESS REPORT (UBR)**FILED****May 13, 2002 8:00 am**
Secretary of State

05-13-2002 90184 038 ****61.25

DOCUMENT # 743840

1. Entity Name

MARINER SANDS PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**6500 MARINER SANDS DRIVE
STUART FL 34997****6500 MARINER SANDS DRIVE
STUART FL 34997**

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

GERSTNER, LARRY C**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: FEE IS \$61.259. 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	D	☒ Delete
NAME	JACOBSON, ALLAN	
STREET ADDRESS	5391 BURNING TREE CIRCLE	
CITY-ST-ZIP	STUART FL 34997	

TITLE	VD	☐ Change ☒ Addition
NAME	RICHARD RIDGWAY	
STREET ADDRESS	6285 OAKMONT PLACE	
CITY-ST-ZIP	STUART FL 34997	

TITLE	PD	☒ Delete
NAME	BRUTETTE, GENE	
STREET ADDRESS	5111 BRANDYWINE WAY	
CITY-ST-ZIP	STUART FL 34997	

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

TITLE	DV	☐ Delete
NAME	FRANKLIN, JAMES	
STREET ADDRESS	6266 SE OAKMONT PLACE	
CITY-ST-ZIP	STUART FL 34997	

TITLE	PD	☒ Change ☐ Addition
NAME	JAMES FRANKLIN	
STREET ADDRESS	6266 OAKMONT PLACE	
CITY-ST-ZIP	STUART FL 34997	

TITLE	TD	☐ Delete
NAME	REAGAN, JOHN C	
STREET ADDRESS	6273 CANTERBURY LANE	
CITY-ST-ZIP	STUART FL 34997	

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

TITLE	D	☐ Delete
NAME	MAZESKI, EDWARD	
STREET ADDRESS	6265 MARINER SANDS DRIVE	
CITY-ST-ZIP	STUART FL 34997	

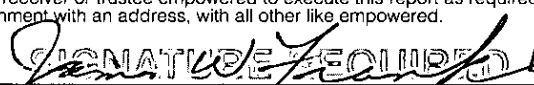
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	SD	☐ Delete
NAME	MORTON, ANNE-MARIE	
STREET ADDRESS	6245 OAKMONT PLACE	
CITY-ST-ZIP	STUART FL 34997	

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 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:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**JAMES W. FRANKLIN 4/24/02 (772) 283-1114**

Date

Daytime Phone #

CR2E037 (9/01)