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

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2147192 ☐ 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
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 $61.25

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	D JACOBSON, ALLAN 5391 BURNING TREE CIRCLE STUART FL 34997	☒ Delete	VD RICHARD RIDGWAY 6285 OAKMONT PLACE STUART FL 34997	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BRUTETTE, GENE 5111 BRANDYWINE WAY STUART FL 34997	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV FRANKLIN, JAMES 6266 SE OAKMONT PLACE STUART FL 34997	☐ Delete	PD JAMES FRANKLIN 6266 OAKMONT PLACE STUART FL 34997	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD REAGAN, JOHN C 6273 CANTERBURY LANE STUART FL 34997	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MAZESKI, EDWARD 6265 MARINER SANDS DRIVE STUART FL 34997	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MORTON, ANNE-MARIE 6245 OAKMONT PLACE STUART FL 34997	☐ Delete		☐ Change ☐ Addition

CR2E037 (9/01)

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 REQUIRED JAMES W. FRANKLIN 4/24/02 (772) 283-1114
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #