

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 14, 2007 8:00 am
Secretary of State

04-30-2007 90839 031 ****61.25

DOCUMENT # 771257

1. Entity Name
**MARINER'S BOATHOUSE AND BEACH RESORT
CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business
**7630 ESTERO BLVD
FT MYERS BCH, FL 33931 US**

Mailing Address
**PO BOX 540669
MERRITT ISLAND, FL 32954 US**

66019050



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04272007

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number

59-2340314

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

**TAKACS, JOE
271 CROCKETT BLVD.
MERRITT ISLAND, FL 32953**

7. Name and Address of New Registered Agent

Name

ROBERT PRICE

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

271 CROCKETT BLVD

City

MERRITT ISLAND FL

Zip Code

32953

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 reinstating)

DATE

06-06-07

**Filing Fee is \$61.25
Due by May 1, 2007**

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	P	<input checked="" type="checkbox"/> Delete
NAME	PANAGIOTIS, GUST	
STREET ADDRESS	7630 ESTERO BLVD.	
CITY - ST - ZIP	FORT MYERS BEACH, FL 33931	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	MAXWELL, DIANNE	
STREET ADDRESS	7630 ESTERO BLVD.	
CITY - ST - ZIP	FORT MYERS BEACH, FL 33931	
TITLE	STD	<input checked="" type="checkbox"/> Delete
NAME	SCHLOEAL, GAIL	
STREET ADDRESS	7630 ESTERO BLVD	
CITY - ST - ZIP	FORT MYERS BEACH, FL 33931	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CANLON, DONNA	
STREET ADDRESS	7630 ESTERO BLVD	
CITY - ST - ZIP	FT MYERS BCH, FL 33931	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SCHLOEGL, GAIL	
STREET ADDRESS	7630 ESTERO BLVD	
CITY - ST - ZIP	FT MYERS BCH, FL 33931	
TITLE	S/T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BRUE, ALLEN	
STREET ADDRESS	7630 ESTERO BLVD	
CITY - ST - ZIP	FT MYERS BCH, FL 33931	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 Chapter 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:

Gail Schloegl

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06-08-07

Date

Daytime Phone #