

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 827192**

1. Entity Name

THE MARINER GROUP, INC.**FILED**
Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90284 049 ***150.00

00011006



DO NOT WRITE IN THIS SPACE

Principal Place of Business 12800 UNIVERSITY DR SUITE 350 SUITE #260 FT MYERS FL 33907		Mailing Address 12800 UNIVERSITY DR SUITE 350 SUITE #260 FT MYERS FL 33907	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		3. Mailing Address 12800 University Drive Suite, Apt. #, etc. Suite 260 City & State Zip	
Country		Country	
4. FEI Number 34-1089734		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TEN BROECK, ALLEN G 12800 UNIVERSITY DR SUITE 350 SUITE #260 FT MYERS FL 33907		7. Name and Address of New Registered Agent Name Allen G. Ten Broek Street Address (P.O. Box Number is Not Acceptable) 12800 University Drive Suite #260 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 _____			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	
10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
CM TAYLOR, ROBERT M. 12800 UNIVERSITY DRIVE, #260 FT. MYERS FL		Change Addition	
PS TEN BROECK, ALLEN G 12800 UNIVERSITY DR #260 FT. MYERS FL		Change Addition	
AS SUSZEK, LINDA M 12800 UNIVERSITY DRIVE, SUITE #260 FORT MYERS FL		Change Addition	
Delete		Change Addition	
Delete		Change Addition	
Delete		Change Addition	
Delete		Change Addition	
Delete		Change Addition	
Delete		Change Addition	

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 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

1/18/01

Date

Daytime Phone #

CR2E034 (10/00)