

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K61723

FILED
Jan 07, 2005
Secretary of State

Entity Name: MARINER INVESTMENTS, INC.

Current Principal Place of Business:

10770 US HWY 19, SUITE # 201
PINELLAS PARK, FL 33782

New Principal Place of Business:

Current Mailing Address:

10770 U S HWY 19 ,
SUITE # 201
PINELLAS PARK, FL 33782

New Mailing Address:

FEI Number: 59-3113573 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PRESTON, BETTY
10770 US HWY 19
APT 201
PINELLAS PARK, FL 33782 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PRESTON, BETTY,
Address: 11225 US HWY. 19
City-St-Zip: CLEARWATER, FL 33764

Title: V () Delete
Name: PRESTON, WALTER,
Address: 11225 US HWY 19
City-St-Zip: CLEARWATER, FL 33764

Title: D () Delete
Name: LAMBERT, RICK
Address: 2820 NORTHWOOD WAY
City-St-Zip: SARASOTA, FL 34234

Title: D () Delete
Name: LAMBERT, JERRY
Address: 5890-63RD ST. N.
City-St-Zip: SAINT PETERSBURG, FL 337090

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BETTY PRESTON

P

01/07/2005

Electronic Signature of Signing Officer or Director

_____ Date