

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007907

FILED
Apr 13, 2012
Secretary of State

Entity Name: MARINER'S POINTE I.S.C.A, INC.

Current Principal Place of Business:

19829 GULF BOULEVARD
INDIAN SHORES, FL 33785

New Principal Place of Business:

Current Mailing Address:

C/O S/3 CONSULTING GROUP LLC
19534 GULF BLVD #202
INDIAN SHORES, FL 33785 US

New Mailing Address:

FEI Number: 59-3756009 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, WILLIAM F
C/O S/3 CONSULTING GROUP, LLC
19534 GULF BLVD # 202
INDIAN SHORES, FL 33785 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

OFFICERS AND DIRECTORS:

Title: PD
Name: BRAKE, DAVID A
Address: 19829 GULF BLVD. #104
City-St-Zip: INDIAN SHORES, FL 33785 US

Title: TD
Name: BRADY, ROBERT
Address: 19829 GULF BLVD # 702
City-St-Zip: INDIAN SHORES, FL 33785 US

Title: VD
Name: GLENN, DARRYL T
Address: 6980 HIDDEN OAKS CIRCLE
City-St-Zip: CLEARWATER, FL 33764 US

Title: VD
Name: SCHEAR, LARRY
Address: 19829 GULF BLVD #502
City-St-Zip: INDIAN SHORES, FL 33785 US

Title: SD
Name: BARLOW, JAN
Address: 694 GRASSLANDS VILLAGE CIRCLE
City-St-Zip: LAKELAND, FL 33803 US

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID BRAKE

PD

04/13/2012

Electronic Signature of Signing Officer or Director

Date