## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000000229

FILED Mar 22, 2007 Secretary of State

Entity Name: MARINER'S GATE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1166 PELICAN BAY DRIVE 1190 PELICAN BAY DRIVE DAYTONA BEACH, FL 32119 DAYTONA BEACH, FL 32119

Current Mailing Address: New Mailing Address:

1166 PELICAN BAY DRIVE
DAYTONA BEACH, FL 32118

1190 PELICAN BAY DRIVE
DAYTONA BEACH, FL 32118

FEI Number: 36-4551884 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BARKIN, MICHELE J
1166 PELICAN BAY DRIVE
DAYTONA BEACH, FL 32119 US

BARKIN, MICHELE J
1190 PELICAN BAY DRIVE
DAYTONA BEACH, FL 32119 US

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: 03/22/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DP ( ) Delete Title: DP (X) Change ( ) Addition

Name: HAWVER, BRAD Name: BENIGNO, RUTH
Address: 409 CENTRAL MARINER'S DR Address: 347 MARINER'S GATE DRIVE

Address: 409 CENTRAL MARINER'S DR. Address: 347 MARINERS GATE DRIVE City-St-Zip: EDGEWATER, FL 32141 City-St-Zip: EDGEWATER, FL 32141

Title: DV ( ) Delete Title: DV (X) Change ( ) Addition Name: BENIGNO, RUTH Name: NARDUCCI, GREGG

Address: 347 MARINER'S GATE DR. Address: 351 MARINER'S GATE DR. City-St-Zip: EDGEWATER, FL 32141 City-St-Zip: EDGEWATER, FL 32141

Title: DST ( ) Delete Title: DST (X) Change ( ) Addition

Name:MCNAMARA, BRANDIName:MASTROGIACOMO, SAMAddress:343 MARINER'S GATE DR.Address:331 MARINER'S GATE DR.City-St-Zip:EDGEWATER, FL 32141City-St-Zip:EDGEWATER, FL 32141

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RUTH BENIGNO DP 03/22/2007