

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90186 011 ****61.25

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DOCUMENT # N03630

1. Corporation Name

MARINER'S LIGHT CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

16332 GULF BREEZE BLVD.
REDINGTON BEACH FL 33708
US

Mailing Address

10825 SEMINOLE BLVD.
#1
LARGO FL 33778
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

3. Date incorporated or Qualified

06/13/1984

4. FEI Number

59-2646837

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

KAPPER, THOMAS W.
C/O KAPPER, THOMAS W.
10825 SEMINOLE BLVD #1
33778 FL 33708

10. Name and Address of New Registered Agent

81 Name

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

83

84 City LARGO

FL

85 Zip Code 33778

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☒ DELETE

TITLE VP
NAME ESPOSITO, FRANK
STREET ADDRESS 16332 GULF BLVD, #3A
CITY-ST-ZIP REDINGTON BEACH FL 33708

☐ DELETE

TITLE DVP
NAME PEARSON, ALYNE
STREET ADDRESS 16332 GULF BLVD #4B
CITY-ST-ZIP REDINGTON BCH FL

☐ DELETE

TITLE DTS
NAME SHEPHERD, CHARLES
STREET ADDRESS 16332 GULF BLVD UNIT 2A
CITY-ST-ZIP REDINGTON BCH FL

☒ DELETE

TITLE DP
NAME LEIB, MOSHE
STREET ADDRESS 16332 GULF BLVD, #3B
CITY-ST-ZIP REDINGTON BEACH FL 33708

☐ DELETE

TITLE D
NAME SCHALLER, BILL
STREET ADDRESS 16332 GULF BLVD, #1B
CITY-ST-ZIP REDINGTON BEACH FL 33708

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☒ Change ☐ Addition

☒ Change ☐ Addition

☐ Change ☐ Addition

☒ Change ☐ Addition

☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 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

Date

Daytime Phone #

4-13-99 727-391-6699

CR2E037 (11/98)