2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03630

FILED Apr 13, 2007 Secretary of State

Entity Name: MARINER'S LIGHT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 16332 GULF BLVD REDINGTON BEACH, FL 33708 US **Current Mailing Address: New Mailing Address:** 16332 GULF BLVD. REDINGTON BEACH, FL 33708 US FEI Number: 59-2646837 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: RECALVE, HOLLY RECALDE, HOLLY 16332 GULF BLVD 16332 GULF BLVD 2-B REDINGTON BEACH, FL 33708 US REDINGTON BEACH, FL 33708 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: HOLLY RECALDE 04/13/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition STEINBACH, KEN Name: Name: 2516 FLAGG MEADOW CT Address: Address: City-St-Zip: FINKSBURG, MD 21048 City-St-Zip: Title: Title: () Delete () Change () Addition Name: RECALDE, HOLLY Name: Address: 16332 GULF BLVD #2B Address: City-St-Zip: REDINGTON BEACH, FL 33708 City-St-Zip: Title: () Delete Title: (X) Change () Addition LEHNERZ, JI, Name: LEHNERZ, JIM Name: 6481 W. ARKANSAS AVE 6481 W. ARKANSAS AVE Address: Address: City-St-Zip: **DENVER. CO 80232** City-St-Zip: DENVER, CO 80232 Title: () Delete Title: () Change () Addition Name: NOLL, WILLIAM Name: 45 SOUTH ROYAL OAKS DR Address: Address: City-St-Zip: BRISTOL, IL 60512 City-St-Zip: Title: Title: () Delete () Change () Addition WISLOW, ALEX Name: Name: 200 S PROSPECT Address: Address: City-St-Zip: PARK RIDGE, IL 60068 City-St-Zip:

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: HOLLY RECALDE PRES 04/13/2007