2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03630

FILED Mar 29, 2009 Secretary of State

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

Current Br	incipal Place	of Busin	0661		Now Princ	inal Place	of Business:	
Cullentri	mcipai riace	OI Busili	c55.		INEW FILL	ipai riace	of Busiliess.	
16332 GUL REDINGTO	F BLVD. ON BEACH, FL	33708	US					
Current Mailing Address:					New Mailing Address:			
16332 GUL 2-B	F BLVD.							
REDINGTO	ON BEACH, FL	33708	US					
FEI Number:	59-2646837	FEI Numl	ber Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Re	egistered Agent:		Name and	Address o	of New Registered Agent:	
RECALDE, 16332 GUL 2-B REDINGTO		. 33708 l	JS					
The above in the State		submits thi	is statement for th	e purpose o	f changing it	s registere	ed office or registered agent, or both,	
SIGNATUR	RE:							
	Electron	ic Signatu	re of Registered /	Agent			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	D (X) STEINBACH, KE 2516 FLAGG M FINKSBURG, M	EADOW CT			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	P () RECALDE, HOL 16332 GULF BL REDINGTON BE	VD #2B	3708		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	TS () LEHNERZ, JIM 6481 W. ARKAN DENVER, CO 8				Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	S () NOLL, WILLIAM 45 SOUTH ROY BRISTOL, IL 60	'AL OAKS D	R		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title:	VP ()	Delete (Title: Name:	VP WISLOW, /	(X) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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 03/29/2009