

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010631

FILED
Apr 17, 2008
Secretary of State

Entity Name: MARINER VILLAGE OF MARTIN COUNTY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7975 NW 154TH STREET SUITE 400
MIAMI LAKES, FL 33016 US

New Principal Place of Business:

Current Mailing Address:

1111 SE FEDERAL HIGHWAY
SUITE 100
STUART, FL 34994 US

New Mailing Address:

101 N.E. 3 AVENUE
SUITE 1500
FT. LAUDERDALE, FL 33301 US

FEI Number: 20-1872065

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETER M. HODKIN, P.A.
4901 NW 17TH WAY
FORT LAUDERDALE, FL 33309 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 () Delete
Name: BRIELE, ROBERT
Address: 7975 NW 154TH STREET SUITE 400
City-St-Zip: MIAMI LAKES, FL 33016 US

Title: VD () Delete
Name: MIJARES-PILA, LORRAINE
Address: 7975 NW 154TH STREET SUITE 400
City-St-Zip: MIAMI LAKES, FL 33016 US

Title: STD () Delete
Name: LAM, YOLANDA
Address: 7975 NW 154TH STREET SUITE 400
City-St-Zip: MIAMI LAKES, FL 33016 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT BRIELE

P

04/17/2008

Electronic Signature of Signing Officer or Director

Date