

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 20, 2007  
Secretary of State**

DOCUMENT# N09783

Entity Name: MARINERS' VILLAGE MASTER PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

4524 CURRY FORD RD  
PMB 549  
ORLANDO, FL 328122711 US

**New Principal Place of Business:**

**Current Mailing Address:**

4524 CURRY FORD RD  
PMB 549  
ORLANDO, FL 328122711 US

**New Mailing Address:**

FEI Number: 59-2588990      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PHILLIPS, BRUCE  
2581 SKIF DR  
ORLANDO, FL 32812 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: PHILLIPS, BRUCE W  
Address: 2581 SKIF DR  
City-St-Zip: ORLANDO, FL 32812

Title: VD ( ) Delete  
Name: NEWSOME, RON  
Address: 2524 SKIF DR  
City-St-Zip: ORLANDO, FL 32812

Title: TD ( ) Delete  
Name: NEWSOME, RON  
Address: 2524 SKIF DR  
City-St-Zip: ORLANDO, FL 32812

Title: SD ( ) Delete  
Name: HAMILTON, ROBERT  
Address: 4700-9 BUGGY WHIP LN  
City-St-Zip: ORLANDO, FL 32812

**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:

Title: SD (X) Change ( ) Addition  
Name: RIGHTS, BARBARA  
Address: 5299 BONAIRRE BLVD  
City-St-Zip: ORLANDO, FL 32812

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: BRUCE PHILLIPS

PD

04/20/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date