2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001770

FILED Mar 06, 2009 Secretary of State

Entity Name: MARINER VILLAGE PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

A.R. CHOICE MGMT 333 17TH STREET, STE 2-L VERO BEACH, FL 32960

New Mailing Address: Current Mailing Address:

A.R. CHOICE MGMT 333 17TH STREET, STE 2-L VERO BEACH, FL 32960

FEI Number: 65-0481218 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:

ROMANO, ALAN C/O A.R. CHOICE MGMT, INC VERO BEACH, FL 32960

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition YATES, JOHN YATES, JOHN Name: Name: 333 17TH ST. SUITE 2-L Address: 211 SEASIDE PATHWAY Address: City-St-Zip: VERO BEACH, FL 32960 City-St-Zip: VERO BEACH, FL 32963

Title: SD Title: SD (X) Change () Addition () Delete

HULECKI, JOY Name: NEUBARTH, BARBARA Name: Address: 333 17TH ST., SUITE 2-L Address: 50 MARINER BEACH LANE City-St-Zip: VERO BEACH, FL 32960 City-St-Zip: VERO BEACH, FL 32963

Title: () Delete Title: (X) Change () Addition

GILMORE, MICHAEL GILMORE, MICHAEL Name: Name: Address: 333 17TH ST. SUITE 2-L Address: 130 MARINER BEACH LANE City-St-Zip: VERO BEACH, FL 32960 City-St-Zip: VERO BEACH, FL 32963

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: JOHN YATES PD 03/06/2009