

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004121

FILED
Apr 04, 2005
Secretary of State

Entity Name: MARINER'S VINEYARD FELLOWSHIP, INC.

Current Principal Place of Business:

14450 46TH STREET N.
SUITE 105
CLEARWATER, FL 33762 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 17329
CLEARWATER, FL 33762 US

New Mailing Address:

FEI Number: 69-3266431

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GHIOTTO, JEFFREY R
1531 SATSUMA STREET
CLEARWATER, FL 33756 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: GHIOTTO, JEFFREY
Address: 1531 SATSUMA STREET
City-St-Zip: CLEARWATER, FL 33756

Title: SD () Delete
Name: MYERS, TERRY
Address: 12674 97TH STREET, N
City-St-Zip: LARGO, FL 33773

Title: TD () Delete
Name: GILLIS, TIM
Address: 4496 HARBOR HILLS DRIVE
City-St-Zip: LARGO, FL 33770

Title: () Delete
Name:
Address:
City-St-Zip:

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: D () Change (X) Addition
Name: KOZLOWSKI, MICHAEL
Address: 8671 101ST AVE NORTH
City-St-Zip: LARGO, FL 33777

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JEFFREY R. GHIOTTO

PD

04/04/2005

Electronic Signature of Signing Officer or Director

Date