2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# N96000004070

Entity Name: MARINER'S HARBOR HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1649 E GULF BEACH DRIVE
ST GEORGE ISLAND, FL 32328

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 876
EASTPOINT, FL 32328

New Mailing Address:

FEI Number: 58-2257209 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GLEASMAN, WAYNE M
COMMUNITY MANAGEMENT SERVICES
431 MCCLOUD STREET
ST GEORGE ISLAND, FL 32328 US

Name and Address of New Registered Agent:

COMMUNITY MANAGEMENT SERVICES
1914 SUNSET DRIVE
ST GEORGE ISLAND, FL 32328 US

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: WAYNE M GLEASMAN 04/28/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: ELROD, PRISCILLA
Address: 1400 HANCEL PKWY
City-St-Zip: MOORESVILLE, IN 46158

Title: DVP ( ) Delete
Name: JONES, LILA
Address: 751 N HALLMAN RD
City-St-Zip: BOSTON, GA 31626

Title: DSM ( ) Delete
Name: GLEASMAN, WAYNE M
Address: 431 MCCLOUD STREET
City-St-Zip: ST GEORGE ISLAND, FL 32328

Title: DT ( ) Delete
Name: HILLIS, MARK
Address: 1483 ST. CHARLES PLACE
City-St-Zip: TALLAHASSEE, FL 32308

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

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: WAYNE M GLEASMAN DSM 04/28/2006
Electronic Signature of Signing Officer or Director Date