

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 01, 2008 8:00 am**  
**Secretary of State**

04-01-2008 90008 011 \*\*\*\*61.25

<b>DOCUMENT # N97000002124</b>					
<b>1. Entity Name</b> MARINERS LANDING TOWNHOMES HOMEOWNERS ASSOCIATION, INC.					
<b>Principal Place of Business</b> 11350 66TH STREET N SUITE 124 LARGO, FL 33773 US			<b>Mailing Address</b> 11350 66TH STREET N SUITE 124 LARGO, FL 33773 US		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 59-3467032	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  HOLIDAY ISLES PROPERTY MGMT., INC. 11350 66TH STREET N SUITE 124 LARGO, FL 33773			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City		
FL			Zip Code		
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b>					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>			
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> WILSON, JAY 1117 PINELLAS BAYWAY S. #102 TIERRA VERDE, FL 33715		<input checked="" type="checkbox"/> Delete		
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> BLACK, ONDA 1117 PINELLAS BAYWAY S #305 TIERRA VERDE, FL 33715		<input type="checkbox"/> Delete		
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> INGRAM, JOHN 1117 PINELLAS BAYWAY #203 TIERRA VERDE, FL 33715		<input type="checkbox"/> Delete		
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> ERNEST, KASSOFF 1117 PINELLAS BAYWAY S, # 403 TIERRA VERDE, FL 33715		<input type="checkbox"/> Delete		
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> STRINGFELLOW, ROY 1117 PINELLAS BAYWAY S #104 TIERRA VERDE, FL 33715		<input type="checkbox"/> Delete		
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<b>PD</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<b>TD</b> STEVE BLACK 1117 Pinellas Bayway S. # 305 TIERRA VERDE, FL 33715		
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b>					
<b>SIGNATURE:</b> <i>[Signature]</i>		Date: 3/12/08		Daytime Phone #: 548-5402	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					