2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000036312

City-St-Zip:

MIAMI LAKES, FL 33016 US

FILED Apr 17, 2008 Secretary of State

Entity Name: MARINER VILLAGE TOWNHOMES, INC. **Current Principal Place of Business: New Principal Place of Business:** 7975 N.W. 154TH STREET 7975 N.W. 154TH STREET **SUITE #400** SUITE #400 MIAMI LAKES, FL 33016 MIAMI LAKES, FL 33016 US **Current Mailing Address: New Mailing Address:** 7975 N.W. 154TH STREET SUITE #400 MIAMI LAKES, FL 33016 FEI Number: 20-2373350 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: BRIELE, ROBERT T PETER M. HODKIN, P.A. 7975 NW 154 STREET 3389 SHERIDA STREET SUITE 400 #560 MIAMI LAKES, FL 33016 US HOLLYWOOD, FL 33021 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: PETER HODKIN 04/17/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MIJARES, ANTHONY JR. Name: Name: 7975 N.W. 154TH STREET, SUITE 400 Address: Address: City-St-Zip: MIAMI LAKES, FL 33016 US City-St-Zip: Title: Title: () Delete () Change () Addition Name: CARDOSO, SILVIO Name: 7975 N.W. 154TH STREET, SUITE 400 Address: Address: MIAMI, FL 33016 US City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition BRIELE, ROBERT T Name: Name: 7975 N.W. 154 STREET, SUITE 400 Address: Address

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: ROBERT T. BRIELE 04/17/2008 ٧