

**DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
NONPROFIT CORPORATION INFORMATION UPDATE
2011**



Due October 1, 2011 File Online at www.michigan.gov/fileonline

Identification Number 708650	Corporation name MINER LAKE PROPERTY OWNERS' ASSOCIATION
Resident agent name and mailing address of the registered office DIANNE VANDEN BUSSCHE 3614 ALLEGAN DAM RD ALLEGAN MI 49010	
<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>FILED</p> <p>MAR 19 2012</p> <p>by Department Bureau of Commercial Services</p> </div> <div style="text-align: center;"> <p>RECEIVED</p> <p>FEB 14 2012</p> <p>\$20 Dept. of LEG</p> </div> </div>	
The address of the registered office 3614 ALLEGAN DAM RD ALLEGAN MI 49010	

I certify that the board consists of 3 or more directors, and further certify that all directors' names and addresses are previously filed with the Department, and that no changes have occurred in required information since the last filed report.
If you checked the box, proceed to item 6.

1. Mailing address of registered office in Michigan (may be a P.O. Box) <i>2695-120th Avenue, Allegan MI 49010</i>	2. Resident Agent <i>Helen Setter</i>
3. The address of the registered office in Michigan (a P.O. Box may not be designated as the address of the registered office) <i>2695-120th Avenue, Allegan, MI 49010</i>	

4. Describe the purpose and activities of the corporation during the year covered by this report:
To monitor Miner Lake.

	NAME	BUSINESS OR RESIDENCE ADDRESS
If different than President	President (Required)	Samuel Martin 2167 Lorraine Dr Allegan MI 49010
	Secretary (Required)	<i>Helen Setter 2695-120th Ave Allegan MI 49010</i>
	Treasurer (Required)	<i>Helen Setter 2695-120th Ave Allegan MI 49010</i>
	Vice President	<i>Terrence Skogland 2483 Lorraine Dr., Allegan MI 49010</i>
Required 3 or more directors (3 different individuals)	Director (Required)	<i>Samuel Martin</i>
	Director (Required)	<i>Terrence Skogland</i>
	Director (Required)	<i>Helen Setter</i>

6. Report due October 1, 2011.
Filing fee \$20.00.
 If report is certifying no changes occurred, it must be signed by the chairperson or vice-chairperson of the board or the president or vice-president.

Please make your check or money order payable to the State of Michigan. Include payment with completed report in the same envelope.
 Return to: Department of Licensing and Regulatory Affairs
 Bureau of Commercial Services, Corporation Division
 P.O. Box 30767
 Lansing, MI 48909
 (517) 241-6470

Signature of authorized officer or agent <i>[Signature]</i>	Title <i>President</i>	Date <i>9/3/2011</i>	Phone (Optional) <i>269-673-2001</i>
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