

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
NONPROFIT CORPORATION ANNUAL REPORT

2021



Due October 1, 2021 File Online at [www.michigan.gov/corppfileonline](http://www.michigan.gov/corppfileonline)

Identification Number <b>800788944</b>	Corporation name MINER LAKE PROPERTY OWNERS' ASSOCIATION
Resident agent name and mailing address of the registered office  <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="width: 45%;"> <p style="text-align: center; font-weight: bold; font-size: 1.2em;">FILED</p> <p style="text-align: center; font-size: 1.2em;">JAN 06 2022</p> <p style="text-align: center;">Corporations Division</p> </div> <div style="width: 50%;"> <p>TransInfo: 3 24822036-1 10/15/21                      Chk#: 849 Amt: \$20.00                      ID: 800788944</p> </div> </div>	
The address of the registered office  <p style="text-align: center;"><b>2695 120TH AVE ALLEGAN, MI 49010</b></p>	

To certify there are **NO CHANGES** from the previously filed report, check this box and **PROCEED TO ITEM 6** for signature No other sections can be completed if box is checked

1 Mailing address of registered office in Michigan if changed (may be a P O Box) <p style="font-size: 1.2em;">1969 MINER LAKE DRIVE</p>	2 Resident Agent if changed <p style="font-size: 1.2em;">TOM SLOCUM</p>
3 The address of the registered office in Michigan if changed (a P O Box may not be designated as the address of the registered office) <p style="font-size: 1.2em;">1969 MINER LAKE DRIVE ALLEGAN, MI 49010</p>	
4 The purposes and general nature and kind of business in which the corporation engaged in during the year covered by this report <p style="font-size: 1.2em;">TO MONITOR MINER LAKE</p>	
5 <b>NAME and BUSINESS OR RESIDENCE ADDRESS</b> (Print legible and complete names and addresses)	
President	SAMUEL MARTIN 2167 LORRAINE DR ALLEGAN, MI 49010
If different than President	Secretary JOYCE MERRILL 1938 HOMESTEAD DR. ALLEGAN, MI 49010 Treasurer TOM SLOCUM 1969 MINER LAKE DR. ALLEGAN MI 49010
If the corporation is a private foundation or formed to provide care to a dentally underserved population, check the following box If box is checked the board shall consist of 1 or more directors. The board of all other corporations shall consist of 3 or more directors <input type="checkbox"/>	
Required Director(s)	Director SAMUEL MARTIN 2167 LORRAINE DR. ALLEGAN, MI 49010 Director JOYCE MERRILL 1938 HOMESTEAD DR. ALLEGAN, MI 49010 Director TOM SLOCUM 1969 MINER LAKE DR. ALLEGAN, MI 49010
6. Signature of authorized officer or agent X	Title TREASURER
Date 10-8-21	Phone (Optional) 616-218-1587

**FILE ONLINE AND SAVE** time by going to [www.michigan.gov/corppfileonline](http://www.michigan.gov/corppfileonline). You will get an immediate response and you can elect to receive future notices by email to the resident agent. The agent will also be sent an email when a document is filed or a CID/PIN is requested

or mail your completed report with a check or money order payable to the State of Michigan, return to  
 Corporations Division  
 P O Box 30767  
 Lansing, MI 48909  
 (517) 241-6470

**Report due October 1, 2021.**

**Filing Fee \$20.00.**