## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 381221

## **FILED** May 16, 2005 8:00 am Secretary of State 05-16-2005 90196 006 \*\*\*150.00

1. Entity Name GEORGETOWNE MOBILE MANOR, INC.						4	<b>UUUV</b> -			
Principal Place of Business		Mailing Address								
2115 RANGE RD CLEARWATER, FL 33765 US		2115 RANGE RD CLEARWATER, FL 33765 US								
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				05132005	Chg-P	CR2E	034 (10/03)	
City & State		City & State				4. FEI Numb	~.		<del> </del> -	plied For
Zip Country		Zip	Zip Country			5. Certificate of Status Desired See Required				
	6. Name and Address of Current	Registered Agent	1	1		7. Name and	Address of New F	Registered		
				Name						
PIPER, WA 2115 RANG CLEARWA				Street A	ddress (	P.O. Box Numb	er is Not Acceptabl	e)		
				City				FL	Zip Code	e
	named entity submits this statement for ions of registered agent.	or the purpose of changing its	register	ed office or	r register	ed agent, or bo	th, in the State of Fl	orida. I am	familiar with,	and accept
SIGNATURE_										
	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registere	ed Agent Bignet	ure required	when reinstating)	r	DATE		
1	LE NOW!!! FEE IS \$150.00 ue by September 7, 2005	9. Election Campa Trust Fund Conf	_			.00 May Be ed to Fees	In accordance corporation did	with s. 607 not receiv	7.193(2)(b), re the prior r	F.S., the notice.
10.	OFFICERS AND	DIRECTORS	11.			ADDITIONS	I	FICERS ANI	D DIRECTOR:	S IN 11
TITLE	PTD	☐ Delete	TITL	.E					☐ Change	Additio:
NAME STREET ADDRESS	REEVES, LEONARD	EEVES, LEONARD DD STREET		IME REET ADDRESS						
CITY-ST-ZIP	LAKELAND, FL 33815			Y-ST-ZIP						
TITLE	VD	Delete	TITL	.E	٧D				Change	☐ Additio
NAME	PIPER, WALTER, J		NAM	AE		2, WALTER				
STREET ADDRESS CITY-ST-ZIP	1948 BELLEAIR			EET ADDRESS Y-ST-ZIP		TOOKES R		34689		
TITLE	SD SD S3764	П г	_		CLER	ew a TER, F	L PREST	1007		
NAME	WILDER, SUZANNE P	☐ Delete	TITU						☐ Change	Additio.
STREET ADDRESS	1338 PRESERVATION WAY		STR	EET ADDRESS						
CITY-ST-ZIP	OLDSMAR, FL 34677		cm	Y-ST-ZIP	<u> </u>			. <u> </u>		
TITLE	V PIDED COOTT	☐ Delete	TITL		معد	-5 <del>6017</del>			<b>Change</b>	Additio
NAME STREET ADDRESS	PIPER, SCOTT 2115 RANGE RD.		NAA Str	ME REET ADDRESS		730011				
CITY-ST-ZIP	CLEARWATER, FL 33765			Y-ST-ZIP						
TITLE		☐ Delete	tin	LÉ					☐ Change	Additio-
NAME			NAA							
STREET ADDRESS CITY-ST-ZIP				NEET ADDRESS Y-ST-ZIP						
TITLE		☐ Delete	TITL		<u> </u>				☐ Change	Additio
NAME		L Deicie	NAA							L.J AUGRIO
STREET ADDRESS				REET ADDRESS						
CITY-ST-ZIP	1		CIT	Y+ST-ZIP						

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, 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.

SIGNATURE:

SCOTT PIEER

5/13/05

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