

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 381221

1. Entity Name
GEORGETOWNE MOBILE MANOR, INC.



Principal Place of Business
2115 RANGE RD
CLEARWATER, FL 33765 US

Mailing Address
2115 RANGE RD
CLEARWATER, FL 33765 US

FILED
Mar 09, 2007 08:00 AM
Secretary of State



01252007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1350028	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PIPER, WALTER J.
2115 RANGE RD
CLEARWATER, FL 33765

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000660959
03/20/07-80021-025 150.00

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	REEVES, LEONARD
STREET ADDRESS	24 DD STREET
CITY-ST-ZIP	LAKELAND, FL 33815

TITLE	VD
NAME	PIPER, WALTER, J
STREET ADDRESS	1162 TOOKES RD
CITY-ST-ZIP	TARPON SPRINGS, FL 34689

TITLE	SD
NAME	WILDER, SUZANNE P
STREET ADDRESS	1338 PRESERVATION WAY
CITY-ST-ZIP	OLDSMAR, FL 34677

TITLE	V
NAME	PIPER, SCOTT
STREET ADDRESS	2115 RANGE RD.
CITY-ST-ZIP	CLEARWATER, FL 33765

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SCOTT PIPER

3/7/07

Date

727-698-0274

Daytime Phone #