

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004961

FILED
Jul 09, 2004
Secretary of State

Entity Name: A/C MOBILE HOME PARK, INC.

Current Principal Place of Business:

10305 US # 1 SOUTH
SEBASTIAN, FL 32958

New Principal Place of Business:

1277 N. SEMORAN BLVD
SUITE 119
ORLANDO, FL 32807

Current Mailing Address:

36 EAST FOURTH STREET
STE 600
CINCINNATI, OH 45202

New Mailing Address:

1277 N. SEMORAN BLVD
STE 119
ORLANDO, FL 32807

FEI Number: 31-1611090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLEKAMP, H. WAYNE
1561 MIZELL AVENUE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

KLEKAMP, H. WAYNE
441 GENIUS DRIVE
WINTER PARK, FL 32789 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: H. WAYNE KLEKAMP

07/09/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KLEKAMP, H. WAYNE
Address: 1561 MIZELL AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: STD () Delete
Name: KLEKAMP, DIANNE
Address: 1561 MIZELL AVENUE
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KLEKAMP, H. WAYNE
Address: 441 GENIUS DRIVE
City-St-Zip: WINTER PARK, FL 32789

Title: STD (X) Change () Addition
Name: KLEKAMP, DIANNE
Address: 441 GENIUS DRIVE
City-St-Zip: WINTER PARK, FL 32789

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: H. WAYNE KLEKAMP

PD

07/09/2004

Electronic Signature of Signing Officer or Director

Date