

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**Apr 08 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # J67340 (6)**  
 1. Corporation Name  
**DUNEDIN MOBILE MANOR HOMEOWNERS, INC.**



Principal Place of Business: 130 PATRICIA AVE, LOT 19, DUNEDIN FL 34698, US  
 Mailing Address: 130 PATRICIA AVE, LOT 19, DUNEDIN FL 34698, US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/15/1987

4. FEI Number: 59-2801881 Applied For:  Not Applicable

5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

2. Principal Place of Business: 21, 22, 23, 24  
 2a. Mailing Address: 25, 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent  
**DAMONTE, JONATHAN JAMES**  
 7800 113TH STREET NORTH  
 SUITE 206  
 SEMINOLE FL 34842

10. Name and Address of New Registered Agent  
 81 Name: ROY WARD  
 82 Street Address (P.O. Box Number is Not Acceptable): 130 Patricia Ave  
 83  
 84 City: Dunedin FL 85 Zip Code: 34698

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Roy Ward* Roy Ward Accountant DATE: 3/24/98

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	SECRET, DAVID	
STREET ADDRESS	130 PATRICIA AVE., 24	
CITY-ST-ZIP	DUNEDIN FL	
TITLE	SAD	<input type="checkbox"/> DELETE
NAME	MCOQUATE, MARY	
STREET ADDRESS	130 PATRICIA AVE., 61	
CITY-ST-ZIP	DUNEDIN FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	BIE, GLORIA	
STREET ADDRESS	130 PATRICIA AVE 23	
CITY-ST-ZIP	DUNEDIN FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	KINSLEY, ROBERT	
STREET ADDRESS	130 PATRICIA AVE, 63	
CITY-ST-ZIP	DUNEDIN FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CARMICHAEL, DICK	
STREET ADDRESS	130 PATRICIA AVE., #113	
CITY-ST-ZIP	DUNEDIN FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	CORNELL, RAY	
STREET ADDRESS	130 PATRICIA AVE #20	
CITY-ST-ZIP	DUNEDIN FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	SECRET, DONALD	
1.3 STREET ADDRESS	130 Patricia Ave #24	
1.4 CITY-ST-ZIP	Dunedin, FL	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	URELLO, CHARLES	
3.3 STREET ADDRESS	130 PATRICIA AVE #5	
3.4 CITY-ST-ZIP	DUNEDIN, FL	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	GALLERANI, PETER	
6.3 STREET ADDRESS	130 PATRICIA AVE #69	
6.4 CITY-ST-ZIP	DUNEDIN, FL	

14. 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 annual report or supplemental annual 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; that the receiver or trustee is empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or in an attachment with an address.

SIGNATURE: *Donald Secret* DONALD SECREST - President DATE: MAR 24, 1998 (813) 738-1512

CR2E034 (10/97)