FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY 01 PM 1:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # K 11038 (2)

1. Corporation Name
MOBILE HOME PARK
NEW RANCH MHP HOMEOWNERS ASSOC., INC.

Principal Place of Business	Mailing Address
2291 GULF TO BAY #125 CLEARWATER, FL. 34625	2291 GULF TO BAY BLVD. # 125 CLEARWATER FL. 34625

3. Date Incorporated or Qualified: 01/07/1988
3a. Date of Last Report: 01/25/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: 59-2982819 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

FULTON, CECIL
2291 GULF TO BAY BLVD, #147
CLEARWATER, FL. 34625

10. Name and Address of New Registered Agent

81 Name: ROBERT COLLINS
82 Street Address (P.O. Box Number is Not Acceptable): 2291 GULF TO BAY BLVD. #125
83 #125
84 City: CLEARWATER FL 85 Zip Code: 34625

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: Robert L Collins
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	PD FULTON, CECIL 2291 GULF TO BAY BLVD # 147 CLEAR WATER, FL. 34625	1 1 TITLE / 1 2 NAME / 1 3 STREET ADDRESS / 1 4 CITY ST ZIP	☒ Change ☐ Addition PD ROBERT COLLINS 2291 GULF TO BAY BLVD. #125 CLEARWATER, FL, 34625
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D PICKLESIMER, MARION 2291 GULF TO BAY BLVD. # 121 CLEARWATER, FL. 34625	2 1 TITLE / 2 2 NAME / 2 3 STREET ADDRESS / 2 4 CITY ST ZIP	☐ Change ☐ Addition SAME
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	TD COLLINS, ROBERT 2291 GULF TO BAY BLVD. #125 CLEARWATER, FL. 34625	3 1 TITLE / 3 2 NAME / 3 3 STREET ADDRESS / 3 4 CITY ST ZIP	☒ Change ☐ Addition TD ROBERT E. EHRICH 2291 GULF TO BAY BLVD. # 139 CLEARWATER, FL. 34625
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	SD KOWALSKI, WILLIAM 2291 GULF TO BAY BLVD. # 112 CLEARWATER, FL. 34625	4 1 TITLE / 4 2 NAME / 4 3 STREET ADDRESS / 4 4 CITY ST ZIP	☒ Change ☐ Addition SD BETTY TRACEY 2291 GULF TO BAY BLVD. # 107 CLEARWATER, FL. 34625
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VD SHERREN, NORMAN 2291 GULF TO BAY BLVD. # 244 CLEARWATER, FL. 34625	5 1 TITLE / 5 2 NAME / 5 3 STREET ADDRESS / 5 4 CITY ST ZIP	☒ Change ☐ Addition VD TRACEY, JACK 2291 GULF TO BAY BLVD. #107 CLEARWATER, FL. 34625
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		6 1 TITLE / 6 2 NAME / 6 3 STREET ADDRESS / 6 4 CITY ST ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 or the receiver or trustee 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 on an attachment with an address.

SIGNATURE: Robert L Collins Robert L COLLINS APRIL 18 1995 813 791 7796
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

XH 5-1-95