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**FILED**  
**Mar 01, 1999 8:00 am**  
**Secretary of State**

03-01-1999 90243 018 \*\*\*150.00

UD90243

PROFIT CORPORATION  
 ANNUAL REPORT  
 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **K11038**

1. Corporation Name

**NEW RANCH MOBILE HOME PARK HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business

2291 GULF-TO-BAY BLVD.  
 #125  
 CLEARWATER FL 34625

Mailing Address

2291 GULF-TO-BAY BLVD.  
 #125  
 CLEARWATER FL 34625

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/07/1988

4. FEI Number

59-2982819

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Election Campaign Financing

**\$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

**COLLINS, ROBERT**  
 2291 GULF-TO-BAY  
 #125  
 CLEARWATER FL 34625

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE  DELETE

PD  
 NAME COLLINS, ROBERT  
 STREET ADDRESS 2291 GULF TO BAY BLVD., #125  
 CITY-ST-ZIP CLEARWATER FL

TITLE  DELETE

D  
 NAME PICKLESIMER, MARION  
 STREET ADDRESS 2291 GULF TO BAY, #121  
 CITY-ST-ZIP CLEARWATER FL

TITLE  DELETE

D  
 NAME EHRLICH, ROBERT E.  
 STREET ADDRESS 2291 GULF TO BAY, #138  
 CITY-ST-ZIP CLEARWATER FL 33765

TITLE  DELETE

SD  
 NAME TRACEY, BETTY  
 STREET ADDRESS 2291 GULF TO BAY BLVD., #107  
 CITY-ST-ZIP CLEARWATER FL

TITLE  DELETE

VD  
 NAME TRACEY, JACK  
 STREET ADDRESS 2291 GULF TO BAY BLVD., #107  
 CITY-ST-ZIP CLEARWATER FL

TITLE  DELETE

T  
 NAME CHARLTON, WILLIAM B  
 STREET ADDRESS 2291 GULF-TO-BAY BLVD. #233  
 CITY-ST-ZIP CLEARWATER FL 34625

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE  Change  Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE  Change  Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE  Change  Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE  Change  Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE  Change  Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**T CHARLTON WILLIAM G.**  
 2291 GULF TO BAY #233  
 CLEARWATER FL ~~34625~~ 33765

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**WILLIAM G. CHARLTON**

Date  
 Jan 22 1999

Daytime Phone #  
 813-797-8201

CR2E034 (11/98)