

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001891

FILED
Jul 07, 2008
Secretary of State

Entity Name: INDIAN ROCKS MOBILE HOME COOPERATIVE, INC.

Current Principal Place of Business:

12701 126TH AVE. NORTH
#241
LARGO, FL 33774

New Principal Place of Business:

Current Mailing Address:

12701 126TH AVE. NORTH
#241
LARGO, FL 33774

New Mailing Address:

FEI Number: 20-4439205 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF
2401 W BAY DR
SUITE 414
LARGO, FL 33774 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROSSIGNOL, DARRYL
Address: 12701 126TH AVE N #245
City-St-Zip: LARGO, FL 33774

Title: T () Delete
Name: MOORE, PHYLLIS
Address: 12701 126TH AVE N
City-St-Zip: LARGO, FL 33774

Title: S () Delete
Name: BALDWIN, PATRICIA A
Address: 12701 126TH AVE N #235
City-St-Zip: LARGO, FL 33774

Title: VP () Delete
Name: RUSS, CARL
Address: 12701 126TH AVE N
City-St-Zip: LARGO, FL 33774

Title: D () Delete
Name: PORTER, ALEC
Address: 12701 126TH AVE N #246
City-St-Zip: LARGO, FL 33774

Title: D () Delete
Name: GARRAND, ANSEL
Address: 12701 126TH AVE N #15
City-St-Zip: LARGO, FL 33774

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: GARRETT, MARY E
Address: 12701 126TH AVE N 241
City-St-Zip: LARGO, FL 33774

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DOYLE, JOE
Address: 12701 126TH AVE N #46
City-St-Zip: LARGO, FL 33774

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOE DOYLE

FD

07/07/2008

Electronic Signature of Signing Officer or Director

_____ Date