

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003557

FILED  
Mar 11, 2011  
Secretary of State

**Entity Name:** BLUE GABLES MOBILE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

302 RIDGEWOOD AVE. LOT #48  
EDGEWATER, FL 32132

**New Principal Place of Business:**

302 RIDGEWOOD AVE. LOT #40  
EDGEWATER, FL 32132

**Current Mailing Address:**

302 RIDGEWOOD AVE. LOT #48  
EDGEWATER, FL 32132

**New Mailing Address:**

302 RIDGEWOOD AVE. LOT #40  
EDGEWATER, FL 32132

FEI Number: 35-2333125

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LEWIS, JOHN E  
302 RIDGEWOOD AVE. LOT #48  
EDGEWATER, FL 32132 US

**Name and Address of New Registered Agent:**

MERCIER, ELIZABETH  
302 RIDGEWOOD AVE. LOT #40  
EDGEWATER, FL 32132 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: ELIZABETH MERCIER

03/11/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MERCIER, ELIZABETH  
Address: 302 RIDGEWOOD AVE. LOT #40  
City-St-Zip: EDGEWATER, FL 32132

Title: VD  
Name: NEIFERT, LOUIS  
Address: 302 S. RIDGEWOOD AVE., LOT 42  
City-St-Zip: EDGEWATER, FL 32132

Title: SD  
Name: BURKHARDT, LINDA  
Address: 219 HART AVE  
City-St-Zip: EDGEWATER, FL 32132

Title: TD  
Name: MILLER, GERTRUDE  
Address: 302 S. RIDGEWOOD AVE., LOT 50  
City-St-Zip: EDGEWATER, FL 32132

Title: D  
Name: RICHARDSON, TOM  
Address: 302 S. RIDGEWOOD AVE. LOT #22  
City-St-Zip: EDGEWATER, FL 32132

Title: D  
Name: BOEGNER, NORMAN  
Address: 217 HART AVE  
City-St-Zip: EDGEWATER, FL 32132

I hereby 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 all other like empowered.

SIGNATURE: ELIZABETH MERCIER

PRES

03/11/2011

Electronic Signature of Signing Officer or Director

Date