## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N94000005693

Entity Name: CROSSWINDS MOBILE HOME PARK, INC.

FILED May 06, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4125 PARK ST N

ST. PETERSBURG, FL 33709

**Current Mailing Address: New Mailing Address:** 

4125 PARK ST N

ST. PETERSBURG, FL 33709

FEI Number: 59-1456110 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MISLASER, GENEVA 4125 APRK ST N 1028

ST. PETERSBURG, FL 33709

**OFFICERS AND DIRECTORS:** 

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:

Date

Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

1VPD () Delete (X) Change ( ) Addition

CONWAY, SHIRELY CONWAY, SHIRELY Name: Name: 4125 PARK ST N #525 Address: 4125 PARK ST N #525 Address: City-St-Zip: ST. PETERSBURG, FL 33709 City-St-Zip: ST. PETERSBURG, FL 33709

Title: PD ( ) Delete Title: PΩ (X) Change ( ) Addition BLASER, GENEVA Name: MERK, ANITA Name:

Address: 4125 PARK ST N #1028 Address: 4125 PARK ST N #727 City-St-Zip: ST. PETERSBURG, FL 33709 City-St-Zip: ST. PETERSBURG, FL 33709

Title: 2VPD () Delete Title: 1VPD (X) Change ( ) Addition

GILES, GEORGE GILES, GEORGE Name: Name: Address: 4125 PARK ST. N., #139 Address: 4125 PARK ST. N., #947 City-St-Zip: ST. PETERSBURG, FL 33709 City-St-Zip: ST. PETERSBURG, FL 33709

Title: TD () Delete Title: TD (X) Change ( ) Addition

Name: NELSON, ALLAN Name: CAMERON, GAIL

4125 PARK ST N. #836 Address: Address: 4125 PARK ST N. #229 City-St-Zip: SAINT PETERSBURG, FL 33709 City-St-Zip: SAINT PETERSBURG, FL 33709

Title: () Delete Title: 2VPD (X) Change ( ) Addition

MERK, ANITA NELSON, ALLAN Name: Name: 4125 PARK ST. N., #1048 4125 PARK ST. N., #727 Address: Address: City-St-Zip: ST. PETERSBURG, FL 33709 City-St-Zip: ST. PETERSBURG, FL 33709

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANITA L. MERK PD 05/06/2003