2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 31, 2001 8:00 am
Secretary of State
07-31-2001 90010 018 ****70.00

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1. Entity Name

RANCHO MARGATE MOBILE HOME ESTATES ASSOCIATION, (VA)

Principal Place of Business	Mailing Address
RANCHO MARGATE 2900 N STATE ROAD 7 MARGATE FL 33063	PO BOX 934443 MARGATE FL 33063

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 95-2057602 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ALFANO, MARTHA T
2790 RIO NUEVO
MARGATE FL 33063

7. Name and Address of New Registered Agent

Name PAMELA A. BUSHNELL
Street Address (P.O. Box Number is Not Acceptable)
2838 SAN MIGUEL
City MARGATE FL Zip Code 33063

8. 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 Pamela A. Bushnell PAMELA A. BUSHNELL, PRESIDENT 7/21/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
After September 12, 2001, min. will be $236.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ALFANO, MARTHA 2790 RIO NUEVO MARGATE FL 33063	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR/TREASURER BUCCI, EDWARD 5607 MESA VERDE MARGATE FL 33063	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BUSHNELL, PAM 2838 SAN MIGUEL MARGATE FL 33063	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR JONES, JACK 5534 BUENA VISTA MARGATE FL 33063	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ROYER, JEANNE M 2880 SAN MIGUEL MARGATE FL 33063	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR BOLAND, LEONARD	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T CONNER, DOROTHY 5618 BUENA VISTA MARGATE FL 33063	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR VOTTA, EVA 5581 LOS CAMPOS MARGATE FL 33063	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SIMPSON, PRISCELLA 2839 LA PAS MARGATE FL 33063	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT/SECRETARY BUSHNELL, PAMELA 2838 SAN MIGUEL MARGATE FL 33063	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COHEN CAKEN, ARMEDA 5601 SANTA MARIA MARGATE FL 33063	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT ALFANO, MARTHA 2790 RIO NUEVO MARGATE FL 33063	☒ Change ☐ Addition

CR2E037 (5/01)

12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Pamela A. Bushnell PAMELA A. BUSHNELL 7/21/01 (954) 563-1030