

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N12714
 1. Entity Name
PARADISE MOBILE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business Mailing Address
**2201 US415. LOT 9
 RUSKIN FL 33570**

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

FILED
01 MAY 22 AM 9:38
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 2000-01 UBR
 DO NOT WRITE IN THIS SPACE
 03/22/00 90090 020 01.25
 4. FEI Number Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
DONNA SINIFF
2201 US415. LOT 9
RUSKIN FLA. 33570
PRESIDENT

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
400004481214--3
-0771701--01083--003
 City
*******61.25 *****61.25**
FL Zip Code

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 **Donna Siniff** (NOTE: Registered Agent signature required when reinstating) DATE **04-09-01**

FILE NOW: FEE IS \$61.25
 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HOWARD FLATT <input checked="" type="checkbox"/> Delete 2201 US415 LOT 24 RUSKIN FL 33570 VICE PRESIDENT
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ARLENE GOODWIN <input checked="" type="checkbox"/> Delete 2201 US415. LOT 53 RUSKIN FL. 33570 SECRETARY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DONNA SINIFF 2201 US415 LOT 9 RUSKIN FL. 33570 PRESIDENT <i>Current</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DON SMITH 2201 US415 LOT 28 RUSKIN FL 33570 Director <i>Current</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MARVIN ROON 2201 US415 Lot 62 RUSKIN FL. 33570 Director <i>Current</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WILBER WEST 2201 US415 LOT 5 RUSKIN FL. 33570 Director <i>Current</i>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BILL PRIEST <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2201 US415 40T 101 RUSKIN FL. 33570 VICE - PRESIDENT
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LANA KUBISH <input type="checkbox"/> Change <input type="checkbox"/> Addition 2201 US415. LOT 49 RUSKIN FL. 33570 SECRETARY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ROGER GRANGER <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2201 US415. LOT 58 RUSKIN FL. 33570 DIRECTOR
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JOHN ANGELHOFF <input checked="" type="checkbox"/> Addition 2201 US415 LOT 64 RUSKIN FL. 33570 DIRECTOR <i>Current</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **Donna Siniff** **DONNA SINIFF** DATE: **04-09-01** 813-6410000
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E037 (11/00)