2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED. Apr 24, 2006 08:00 AN Secretary of State DOCUMENT # P97000038253 1. Entity Name TAN TARA MOBILE HOME PARK, INC. Principal Place of Business Mailing Address 140 N. ORLANDO AVENUE 140 N. ORLANDO AVENUE **SUITE 150-9** SUITE 150-9 WINTER PARK, FL 32789 WINTER PARK, FL 32789 No Cha-P CR2E034 (11/05) 04202006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3456719 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GARBER, LAMONT DO NOT WRITE 140 N. ORLANDO AVENUE **SUITE 150-9** IN THIS SPACE WINTER PARK, FL 32789 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable DATE (NOTE, Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Un00000528134 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 05/05/06-80023-023 150.00 10. OFFICERS AND DIRECTORS TIME GARBER, LAMONT NAME STREET ADDRESS 140 N. ORLANDO AVENUE CITY-ST-7IP WINTER PARK, FL 32789 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE THE NAME STREET ADDRESS CITY-ST-ZIP NAME

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, 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:

STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

> 077408773 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/06

4077408773

Daytime Phone #