2008 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 07, 2008 8:00 am Secretary of State DOCUMENT # J63607 MOBILE ESTATES HOMEOWNERS ASSOCIATION, INC. 04-07-2008 90046 042 ***150.00 Principal Place of Business Mailing Address 6741 S. TAMIAMI TRAIL 6741 S. TAMIAMI TRAIL SARASOTA, FL 34231 SARASOTA, FL 34231 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04012008 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 59-2798064 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STEPHEN H. KURVIN, ESQ. Street Address (P.O. Box Number is Not Acceptable) 7 SOUTH LIME AVENUE SARASOTA, FL 34237 City 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. I am familiar with, and accept the obligations of registered agent SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Addition TITLE ☐ Delete TITLE Change PRIB. LOUISE NAME NAME Bill Koukal Sarasota, Fl 2093 GLENWOOD DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA, FL CITY-ST-ZIP D TITLE ☐ Delete TITLE ☐ Change Addition Robert Sheely 2080 S. Mobile E Sarasota, Fl **BURTON, GORDON** NAME STREET ADDRESS 2043 N NOBILE ESTATES DR STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34231 CITY-ST-ZIP TITLE D ☐ Delete TITLE ☐ Addition Alex Watson BARNES, CRIT NAME NAME 2068 N. Mobi Sarasota F 2134 TROTWOOD DR STREET ADDRESS STREET ADDRESS CITY-ST-7P SARASOTA, FL 34231 CITY-ST-ZIP VP TITLE ☐ Delete TITLE Addition D NAME WESTON, MARJORIE NAME Estates-D(STREET ADDRESS 2077 DETROITER STREET STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34231 CITY-ST-ZIP TITLE ☐ Delete TITLE Addition Change THOMAS, WILL NAME NAME 2037 DETROITER ST STREET ADDRESS STREET ADDRESS CTTY-ST-ZIP SARASOTA, FL 34231 CITY-ST-ZIP Delete TITLE ☐ Addition TITLE DESCHAMPS, FRED NAME 2100 DETROITE ST STREET ADDRESS STREET ADDRESS SARASOTA, FL 34231 CITY-ST-ZIP Sanasota 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statules. 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: