

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737053

Entity Name: CURLEW MOBILE HOME ESTATES ASSOCIATION, INC.**Current Principal Place of Business:**7300 PARK STREET
SEMINOLE, FL 33777**Current Mailing Address:**7300 PARK STREET
SEMINOLE, FL 33777**FEI Number:** 59-2267070**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RABIN & PARKER, P.A.
28163 U.S. HWY 19 N, SUITE 207
CLEARWATER, FL 33761 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	DP
Name	GILRAY, PENNY
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

Title	DVP
Name	VOSS, SHEILA
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

Title	DS
Name	MONTEONE, JOE
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

Title	DT
Name	PRICE, BARB
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

Title	D
Name	BERENATO, DOMENIC
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

Title	D
Name	DOUCETTE, ROLAND
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

Title	D
Name	WILLIAMS, RICHARD
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

I hereby 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 all other like empowered.

SIGNATURE: PENNY GILRAY**PRESIDENT****04/04/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date