

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07560

**Entity Name:** HILLSIDE MOBILE HOME OWNER'S, INC.**Current Principal Place of Business:**39618 SWEETGUM AVE  
ZEPHYRHILLS, FL 33542**Current Mailing Address:**39618 SWEETGUM AVE  
ZEPHYRHILLS, FL 33542 US**FEI Number:** 59-2828202**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PEELMAN, ELMER G  
39618 SWEETGUM AVE  
ZEPHYRHILLS, FL 33542 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	PRES
Name	PEELMAN, SHERRY
Address	39629 PERSIMMON AVE
City-State-Zip:	ZEPHYRHILLS FL 33542

Title	2VP
Name	GARLOCK, GARY
Address	39646 PERSIMMON AVE
City-State-Zip:	ZEPHYRHILLS FL 33542

Title	S
Name	NICKELSON, MARILYN
Address	39712 CALAMANDA AVE.
City-State-Zip:	ZEPHYRHILLS FL 33542

Title	DIRECTOR
Name	CAMPBELL, JACKIE
Address	39700 PERSIMMON AVE
City-State-Zip:	ZEPHYRHILLS FL 33542

Title	1ST VICE PRESIDENT
Name	MYOTT, FRANK
Address	39712 PERSIMMON AVE
City-State-Zip:	ZEPHYRHILLS FL 33542

Title	T
Name	DAVIS, DAVID
Address	39635 SWEETGUM AVE
City-State-Zip:	ZEPHYRHILLS FL 33542

Title	D
Name	COLF, KENNETH
Address	39712 SWEETGUM AVE
City-State-Zip:	ZEPHYRHILLS FL 33542

Title	DIRECTOR
Name	PEELMAN, ELMER G
Address	39618 SWEETGUM AVE
City-State-Zip:	ZEPHYRHILLS FL 33542

**Continues on page 2**

*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:** ELMER G. PEELMAN**RESIDENT AGENT****04/04/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	HADEN, CHARLES
Address	39628 SWEETGUM AVE
City-State-Zip:	ZEPHYRHILLS FL 33542