

2017 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	1ST VICE PRESIDENT
Name	MYOTT, FRANK
Address	39712 PERSIMMON
City-State-Zip:	ZEPHYRHILLS FL 33542

Title	T
Name	ALEXANDER, LARRY
Address	39651 CALAMANDA
City-State-Zip:	ZEPHYRHILLS FL 33542

Title	S
Name	ALEXANDER, DENISE
Address	39651 CALAMANDA
City-State-Zip:	ZEPHYRHILLS FL 33542

Title	D
Name	CHUBB, JIM
Address	39518 ROSE BUSH LANE
City-State-Zip:	ZEPHYRHILLS FL 33542

Title	DIRECTOR
Name	FOUST, CHARLES
Address	39628 PERSIMMON
City-State-Zip:	ZEPHYRHILLS FL 33542

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

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****03/14/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date