

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003557

FILED
May 06, 2014
Secretary of State
CC7379197570

Entity Name: BLUE GABLES MOBILE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

302 RIDGEWOOD AVE. LOT #23
EDGEWATER, FL 32132

Current Mailing Address:

302 RIDGEWOOD AVE. LOT #23
EDGEWATER, FL 32132

FEI Number: 35-2333125

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HODSON, DOTTY
302 RIDGEWOOD AVE. LOT #23
EDGEWATER, FL 32132 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 LEWIS, JOHN
Address 302 RIDGEWOOD AVE. LOT #48
City-State-Zip: EDGEWATER FL 32132

Title VP
Name OPP, MARTINA
Address 302 S. RIDGEWOOD AVE., LOT #19
City-State-Zip: EDGEWATER FL 32132

Title SEC
Name SARKEY, SHERRY
Address 302S. RIDGEWOOD AVE
City-State-Zip: EDGEWATER FL 32132

Title TD
Name HODSON, DOTTY
Address 302 S. RIDGEWOOD AVE., LOT #23
City-State-Zip: EDGEWATER FL 32132

Title DIRECTOR
Name NEIEFERT, LOUIS
Address 302 RIDGEWOOD AVE. LOT #23
City-State-Zip: EDGEWATER FL 32132

Title D
Name BOEGNER, NORMAN
Address 217 HART AVE
City-State-Zip: EDGEWATER FL 32132

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: DOTTY HODSON

TREASURER

05/06/2014

Electronic Signature of Signing Officer/Director Detail

Date