## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400005693

Entity Name: CROSSWINDS MOBILE HOME PARK, INC.

FILED
Mar 25, 2013
Secretary of State
CC2680393782

**Current Principal Place of Business:** 

4125 PARK ST N.

ST. PETERSBURG, FL 33709

**Current Mailing Address:** 

4125 PARK ST N.

ST. PETERSBURG. FL 33709

FEI Number: 59-1456110 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCNAUGHTON, JOHN 4125 PARK ST N

ST. PETERSBURG, FL 33709 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: JOHN MCNAUGHTON 03/25/2013

Electronic Signature of Registered Agent

Officer/Director Detail:

Title S Title F

 Name
 ROY, SUZANNE
 Name
 O'DONNELL, GEORGE

 Address
 4125 PARK ST N # 413
 Address
 4125 PARK ST N # 636

City-State-Zip: ST. PETERSBURG FL 33709 City-State-Zip: ST. PETERSBURG FL 33709

Title VP Title T

NameCHARRON, THERESANameFORRESTER, GLENYSAddress4125 PARK ST N # 544Address4125 PARK ST N # 447

City-State-Zip: ST. PETERSBURG FL 33709 City-State-Zip: SAINT PETERSBURG FL 33709

Title D

Name PARENT, JOHN

Address 4125 PARK ST. N., #729

City-State-Zip: ST. PETERSBURG FL 33709

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: GLENYS FORRESTER TREASURER 03/25/2013

Electronic Signature of Signing Officer/Director Detail

Date

Date