

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005693

Entity Name: CROSSWINDS MOBILE HOME PARK, INC.

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 STREET 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

03/01/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name ROY, SUZANNE
Address 4125 PARK STEET N
413
City-State-Zip: ST. PETERSBURG FL 33709

Title DIRECTOR
Name EICHER, BETTY
Address 4125 PARK STREET N
624
City-State-Zip: ST. PETERSBURG FL 33709

Title PRESIDENT
Name CHARRON, THERESA
Address 4125 PARK STREET N
City-State-Zip: ST. PETERSBURG FL 33709

Title TREASURER
Name FORRESTER, GLENYS
Address 4125 PARK STREET N
447
City-State-Zip: SAINT PETERSBURG FL 33709

Title VP
Name DONNELLY, WILLIAM
Address 4125 PARK ST N.
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: THERESA CHARRON

PRES

03/01/2017

Electronic Signature of Signing Officer/Director Detail

Date