

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J63607

**Entity Name:** MOBILE ESTATES HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**6741 S. TAMIAMI TRAIL  
SARASOTA, FL 34231**Current Mailing Address:**6741 S. TAMIAMI TRAIL  
SARASOTA, FL 34231**FEI Number:** 59-2798064**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BROWN, SHAUN ESQ.  
1800 SECOND ST. STE 808  
SARASOTA, FL 34236 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:** SHAUN BROWN, ESQ.

03/09/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP OF REAL ESTATE  
Name TRIMPE, JULIE  
Address 2831 RINGLING BLVD, BLDG B  
SUITE 203D  
City-State-Zip: SARASOTA FL 34237

Title DIRECTOR  
Name LEEMAN, DAVID  
Address 2030 DETROITER ST  
City-State-Zip: SARASOTA FL 34231

Title VP  
Name SOLICE, DIANNE .  
Address 2042 CHAMPION ST  
City-State-Zip: SARASOTA FL 34231

Title SECRETARY  
Name LAKE, DEBRA S  
Address 2134 TROTWOOD  
City-State-Zip: SARASOTA FL 34231

Title PRESIDENT  
Name MATTHEWS, JEFF  
Address 2118 GLENWOOD DR  
City-State-Zip: SARASOTA FL 34231

Title COMMUNITY ASSOCIATION  
MANAGER  
Name WILLIAMS, BARBARA J  
Address 6741 S. TAMIAMI TRAIL  
City-State-Zip: SARASOTA FL 34231

Title TREASURER  
Name MATSON, MARA  
Address 2104 TROTWOOD ST.  
City-State-Zip: SARASOTA FL 34231

Title DIRECTOR  
Name TYLER, GREGG  
Address 2040 CHAMPION  
City-State-Zip: SARASOTA FL 34231

**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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BARBARA WILLIAMS

CAM

03/09/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                 DIRECTOR  
Name                KIRKPATRICK, CRAIG  
Address             2096 CHAMPION ST.  
City-State-Zip:    SARASOTA FL 34231-4808

Title                 DIRECTOR  
Name                CORVELLI, STEVE  
Address             6766 VAGABOND  
City-State-Zip:    SARASOTA FL 34231-4808