

**2020 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:** No**Name and Address of Current Registered Agent:**WELLS, KEVIN T 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:** KEVIN T. WELLS, ESQ.

03/03/2020

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 HAEDICKE, JURGEN  
Address 2070 SUN HOME STREET  
City-State-Zip: SARASOTA FL 34231

Title VP  
Name SOLICE, DIANNE .  
Address 2044 CHAMPION  
City-State-Zip: SARASOTA FL 34231

Title SECRETARY  
Name BLANCHARD, JANE  
Address 2048 SUN HOME  
City-State-Zip: SARASOTA FL 34231

Title PRESIDENT  
Name STANKIEWICZ, MARYANN  
Address 2103 TROTWOOD DR  
City-State-Zip: SARASOTA FL 34231

Title DIRECTOR  
Name ANKROM, ERNIE  
Address 2065 DETROITER ST.  
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

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*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:** MARA MATSON**TREASURER**

03/03/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                   DIRECTOR  
Name                 GIFFORD, SCOTT  
Address             2035 CHAMPION ST.  
City-State-Zip:   SARASOTA FL 34231-4808

Title                   DIRECTOR  
Name                 MATTHEWS, JEFFREY  
Address             2118 GLENWOOD ST.  
City-State-Zip:   SARASOTA FL 34231-4808