FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAR 25 PM 2:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 371513 (3)

1. Corporation Name
MOBILE PARK PROPERTIES, INC.

Principal Place of Business	Mailing Address
2018 OAK TERRACE STE 400 SARASOTA FL 34231-3420 US	2018 OAK TERRACE STE 400 SARASOTA FL 34231-3420 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 10/20/1970
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business	2a. Mailing Address
21 1630 North Lake Shore	26 1630 North Lake Shore
Suite, Apt. #, etc. 22 Drive	Suite, Apt. #, etc. 27 Drive
City & State 23 Sarasota, Florida	City & State 28 Sarasota, FL
Zip 24 34231-3444 Country 25 U. S.	Zip 29 34231-3444 Country 30 U.S.

4. FEI Number: 59-1306569 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

TURNER, JAMES L.
1550 RINGLING BLVD
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when name changes)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	☐ Change ☐ Addition
NAME	DES CHAMPS, E. S., III	1.2 NAME	
STREET ADDRESS	1812 MANATEE AVE. W.	1.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	☐ Change ☐ Addition
NAME	PETERSON, WESLEY	2.2 NAME	
STREET ADDRESS	4548 CAMINO REAL	2.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	
TITLE	TD	3.1 TITLE	☐ Change ☐ Addition
NAME	DOSS, JAMES M.	3.2 NAME	
STREET ADDRESS	521 9TH STREET WEST	3.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	LINDSTROM, FRED H	4.2 NAME	
STREET ADDRESS	608 - 63RD ST., NW	4.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	4.4 CITY-ST-ZIP	
TITLE	CD	5.1 TITLE	☐ Change ☐ Addition
NAME	MILLER, JACK M	5.2 NAME	
STREET ADDRESS	4900 RIVERVIEW BLVD W	5.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	5.4 CITY-ST-ZIP	
TITLE	SD	6.1 TITLE	☐ Change ☐ Addition
NAME	BLOODWORTH, GEORGE	6.2 NAME	
STREET ADDRESS	1630 NORTH LAKESHORE DR.	6.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: George Bloodworth George Bloodworth March 15, 1995 813-924-5163
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

033A030 CP