FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jan 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 380515

Principa! Place of Business

8445 FLAXEN DR.

PORT RICHEY FL 34668

(7)

PORT RICHEY FL 34668-6722

Mailing Address

8445 FLAXEN DR.

SUNCOAST GATEWAY MOBILE VILLAGE, INC.

								3. Date Incorporated	or Qualified	3a. Date	e of Last F	Report
								04/16/1971		01/24	I/1996	
2. Principal F	lace of Busine	OSS	2a. Mailir	2a. Mailing Address				4. FEI Number		<u> </u>	A	pplied For
21			26	26				59-1350837		N	ot Applicable	
Suite, Apt	#, etc.		Suite,	Suite, Apt. #, etc.				5. Certificate of Statu	s Desired			Additional equired
City & Stat	te		City 8	City & State				6. Election Campaign	Financino		\$5.00	May Be
23			28	28				Trust Fund Contrib	•			to Fees
Zip		Country	Zip	Zip Cou			8. This corporation has liability for intangible tax			ax under s	. 199.032,	
24	25 29 30							Florida Statutes Yes No				
	9, Name a	and Address of C	urrent Registered	Agent				10. Name and Addres	s of New Re	istered A	gent	
SCH	iultz, arno)LD A			8	I] N	lame					
8440 GETTS DRIVE PORT RICHEY, FL 34668						62 Street Address (P.O. Box Number is Not Acceptable)						
						and the state of t						
						3		· · · · · · · · · · · · · · · · · · ·				
					8	<u> </u>						
							City			FL	85 Zip	Code
11. Pursuant	to the provision	ons of Sections 60	7.0502 and 607.150	8. Florida Statu	ites, the abo	ve-na	amed corpo	oration submits this state	ment for the n	IFPORG OF C	hanging i	ts registered
Office or r	registered ago	ent, or both, in the :	State of Florida, Suc	ch chance was	: authorized t	ov thi	e corporatio	on's board of directors. I	hereby accep	t the appoi	ntment as	registered
	ını tarılılar witi	i, and accept the	obligations of, Secti	on 607.0505, F	lorida Statut	es.						
SIGNATURE	Slanat no Typed o	or product page of souther	red agest and title if applica	thic (NC	TE Boastage A	neol e	onalura reacira	d when reinstaling)		DATE		
12.			S AND DIRECTORS		13.	yer s	Buarne records	ADDITIONS/CHANG	ES TO OFFIC		DIBECTOR	2C IN 12
TATLE	VD			DELETE	1.1 TITLE			ADDITIONS/CHANG	LS TO OFFIC		Change	Addition
NAME	CONTRACT ADMONDA									-	change	ricultion
STREET ADDRESS					1.2 NAME 1.3 STREET ADDRESS							
	PORT RICI		_				5.4.					
CITY - ST - ZIP TITLE	PO	IC1, 1 E 00000		DELETE	1.4 CHY-		Pos	et Richey, E	L 374	<i>b.</i> 8	Change	Addition
NAME	• •	EDWARD E.			2.2 NAME					Ų	Change	Addition
		UCER DRIVE				TREET ADDRESS						
STREET ADDRESS									, r			
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TITLE	8	ARIANT I		L/ELETE	3 1 TITLE		3/	7'	A C.		Change	Addition
NAME	SCHULTZ,		3.2 NAME	Z NAME.		WLTE MYRTA	RIVE					
STREET ADDRESS	8440 GET1					T ADD	PRESS 800	12 Cutocar o				
CITY - ST - ZIP	PUHI KICI	HEY, FL 00000		E7	3.4. CITY		וען יון	ebin wachbe	ru 30	1607		
TITLE				DELETE	4 1 TITLE		1	•		L	Change	Addition
NAME .		MYRTLE C.		4 2 NAME								
STREET ADDRESS	8043 CHAI			43		STREET ADDRESS						
CITY - ST - ZIP	WEEKI WA	CHEE FL			4.4 CITY-	ST - ZI	P					
TITLE				L_] DELETE	51 TITLE					Ĺ,	Change	Addition
NAME					5 2 NAME							
STREET ADDRESS					5.3 STREE	T ADD	ress					
CITY-SI-7IP					5 4 C/TY-	ST-ZII	P					
TITLE				DELETE	61 TITLE					L	Change	Addition
NAME					6.2 NAME							
STREET ADDRESS					6.3 STREE	T ADD	RESS					
CITY-ST-ZIP					6.4 CITY	ST - ZII	p					
14. I do herel	by certify that	the information sur	polied with this filing	does not qual	lify for the ex	omni	tion stated i	in Section 119.07(3)(i), F	orida Statutes	. I further o	ertify that	the
Informatio	on indicated or	n this annual repor	1 or supplemental a	nnual report is:	true and acc	urate	e and that r	ny signature shall have that as required by Chapter (ha cama lacal	offect as it	madaun	dor oath: that
appears i	n Block 12 or	Block 13 if change	ed, or on an attachn	nent with an ad	Idress	2210	iopoit	at logorou by onapler t	oor, i wiida gi	araras, but	a anactity t	rai Fio