# FILED
# May 16, 2005 8:00 am
# Secretary of State

05-16-2005 90196 006 ***150.00

## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # 381221**

1. Entity Name
GEORGETOWNE MOBILE MANOR, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 2115 RANGE RD<br>CLEARWATER, FL 33765 US | 2115 RANGE RD<br>CLEARWATER, FL 33765 US |

05132005 Chg-P CR2E034 (10/03)

| 2. Principal Place of Business | | 3. Mailing Address | |
|---|---|---|---|
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

4. FEI Number 59-1350028 ☐ Applied For ☐ Not Applicable

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

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent |
|---|---|
| PIPER, WALTER J.<br>2115 RANGE RD<br>CLEARWATER, FL 33765 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City **FL** Zip Code |

8. 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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS $150.00
Due by September 7, 2005

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PTD<br>REEVES, LEONARD<br>24 DD STREET<br>LAKELAND, FL 33815 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VD<br>PIPER, WALTER, J<br>1948 BELLEAIR<br>CLEARWATER, FL 33764 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VD<br>PIPER, WALTER J.<br>1163 TOOKES RD<br>CLEARWATER, FL ~~33764~~ 34689 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SD<br>WILDER, SUZANNE P<br>1338 PRESERVATION WAY<br>OLDSMAR, FL 34677 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | V<br>PIPER, SCOTT<br>2115 RANGE RD.<br>CLEARWATER, FL 33765 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ~~V~~<br>~~PIPER, SCOTT~~ | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Scott Piper SCOTT PIPER 5/13/05 7274470323