

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2008 08:00 AM
Secretary of State

DOCUMENT # 416079

1. Entity Name
SUNNY GROVE MOBILE HOME PARK INC



Principal Place of Business
**2463 GULF TO BAY
CLEARWATER, FL 34625**

Mailing Address
**2463 GULF TO BAY
CLEARWATER, FL 34625**

DO NOT WRITE IN THIS SPACE



01192008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1435543

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**STRUCHEN, AUDREY
7924 TENTH AVENUE SOUTH
ST. PETERSBURG, FL 33707**

**DO NOT WRITE
IN THIS SPACE**

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 reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRES
STRUCHEN, FRANK E
9 PARADISE LANE
TREASURE ISLAND, FL 33706**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VICE
STRUCHEN, AUDREY W
7924 TENTH AVENUE SOUTH
ST PETERSBURG, FL 33707**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SEC
HINK, JEAN M
7924 TENTH AVENUE SOUTH
ST. PETERSBURG, FL 33707**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TREA
STRUCHEN, ROBERT
7924 TENTH AVE S
ST PETERSBURG, FL 33707**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000795631
01/28/08-80055-017 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: ROBERT E. STRUCHEN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Robert E. Struchen 1/21/08

727-799-0517

Daytime Phone #