

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 416079

**FILED**  
**Mar 03, 2011**  
**Secretary of State**

**Entity Name:** SUNNY GROVE MOBILE HOME PARK INC

**Current Principal Place of Business:**

2463 GULF TO BAY  
CLEARWATER, FL 34625

**New Principal Place of Business:**

**Current Mailing Address:**

2463 GULF TO BAY  
CLEARWATER, FL 34625

**New Mailing Address:**

2463 GULF TO BAY  
C/O OFFICE  
CLEARWATER, FL 34625

**FEI Number:** 59-1435543

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

STRUCHEN, AUDREY W VICE PR  
7924 TENTH AVENUE SOUTH  
ST. PETERSBURG, FL 33707 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** STRUCHEN, FRANK E  
**Address:** 9 PARADISE LANE  
**City-St-Zip:** TREASURE ISLAND, FL 33706

**Title:** VICE  
**Name:** STRUCHEN, AUDREY W  
**Address:** 7924 TENTH AVENUE SOUTH  
**City-St-Zip:** ST PETERSBURG, FL 33707

**Title:** SEC  
**Name:** HINK, JEAN M  
**Address:** 7924 TENTH AVENUE SOUTH  
**City-St-Zip:** ST. PETERSBURG, FL 33707

**Title:** TREA  
**Name:** STRUCHEN, ROBERT  
**Address:** 7924 TENTH AVE S  
**City-St-Zip:** ST PETERSBURG, FL 33707

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:** FRANK E STRUCHEN

PRES

03/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date