

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 521601

FILED
Apr 22, 2009
Secretary of State

Entity Name: BLUE HORIZON MOBILE HOME PARK, INC.

Current Principal Place of Business:

5145 EAST BAY DRIVE
CLEARWATER, FL 34624

New Principal Place of Business:

5145 EAST BAY DRIVE
CLEARWATER, FL 34624 US

Current Mailing Address:

PO BOX 20003
ST PETERSBURG, FL 33742 US

New Mailing Address:

FEI Number: 59-1706720 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELCH, LEON O.
210 SAND KEY ESTATES DRIVE
CLEARWATER, FL 33767 US

Name and Address of New Registered Agent:

WELCH, LEON O P/D
210 SAND KEY ESTATES DRIVE
CLEARWATER, FL 33767 US

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: LEON O. WELCH

04/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WELCH, LEON O.
Address: 210 SAND KEY ESTATES DRIVE
City-St-Zip: CLEARWATER, FL 33767

Title: STD () Delete
Name: WELCH, LINDA
Address: 210 SAND KEY ESTATES DRIVE
City-St-Zip: CLEARWATER BEACH, FL 33767

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WELCH, LEON O P/D
Address: 210 SAND KEY ESTATES DRIVE
City-St-Zip: CLEARWATER, FL 33767

Title: STD (X) Change () Addition
Name: WELCH, LINDA S S/T/D
Address: 210 SAND KEY ESTATES DRIVE
City-St-Zip: CLEARWATER BEACH, FL 33767

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LINDA S. WELCH

S/T

04/22/2009

Electronic Signature of Signing Officer or Director

Date