2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2001 8:00 am
Secretary of State
03-20-2001 90005 029 ****61.25

0056528

DOCUMENT # 732041

1. Entity Name

FORT DADE MOBILE HOME PARK IMPROVEMENT ASSOCIATI

Principal Place of Business	Mailing Address
ROUTE 1. HIGHWAY 301 DADE CITY FL 33523	C/O LOWELL RICHARDSON 34979 FRASER ST DADE CITY FL 33523

A0034322

DO NOT WRITE IN THIS SPACE

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 52-1328570 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

RICHARDSON, LOWELL
34979 FRASER ST
DADE CITY FL 33523

7. Name and Address of New Registered Agent

Name: William D. Upmeyer
Street Address (P.O. Box Number is Not Acceptable): 34982 Hawkiowa Rd.
City: Dade City FL Zip Code: 33523

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.

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

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P RICHARDSON, LOWELL 34979 FRASER ST DADE CITY FL 33523	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President William D. Upmeyer 34982 Hawkiowa Rd Dade City, Fl. 33523	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V UPMEYER, WILLIAM 34982 HAWKIOWA ST DADE CITY FL 33523	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P Donald Arsenault 35001 Fraser St. Dade City, Fl. 33523	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHETENHELM, ROSE 3980 BASSINGER ST DADE CITY FL 33523	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Rose Shetenhelm 3980 Bassinger St. Dade City, Fl. 33523	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DURKOP, HAROLD 34967 FRASER ST DADE CITY FL 33523	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Harold Durkop 34967 Fraser St. Dade City, Fl 33523	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOECKMAN, JUNIOR 35010 ROMAR ST DADE CITY FL 33523	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Don Christensen 35002 Romar St. Dade City, Fl	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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 617, 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: William D. Upmeyer William D. Upmeyer 3-12-01 352-583-2413
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

MANDATORY REQUIRED