


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2006 8:00 am
Secretary of State

02-17-2006 90062 010 ****70.00

DOCUMENT # 732041			
1. Entity Name FORT DADE MOBILE HOME PARK IMPROVEMENT ASSOCIATION, INC.		Principal Place of Business ROUTE 1, HIGHWAY 301 DADE CITY, FL 33523	
Mailing Address C/O LOWELL RICHARDSON 34979 FRASER ST DADE CITY, FL 33523		2. Principal Place of Business ROUTE 1, HIGHWAY 301 DADE CITY, FL 33523	
3. Mailing Address C/o Shirley Whalen 34992 Fraser St. Dade City, FL 33523		Suite, Apt. #, etc. 34992 Fraser St.	
City & State Dade City, FL		City & State Dade City, FL	
Zip 33523		Country Hernando	
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: Shirley Whalen, Treasurer Street Address (P.O. Box Number is Not Acceptable): 34992 Fraser St. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <i>Shirley Whalen</i>		DATE <i>2/13/06</i>	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RANSOM, PEGGY 35005 FRASER STREET DADE CITY, FL 33523 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P David B. Moore 34896 Hawk Tower Road Dade City, FL 33523 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BOECKMAN, BUTCH 35010 ROMAR ST. DADE CITY, FL 33523 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Gary Wegner 34992 Romar St. Dade City, FL 33523 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WHALEN, SHIRLEY 34992 FRASER ST. DADE CITY, FL 33523 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Lola Y. Talbert 34896 Romar St. Dade City, FL 33523 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RICHARDSON, LOWELL 34979 FRASER STREET DADE CITY, FL 33523 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Shirley Whalen 34992 Fraser St. Dade City, FL 33523 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STRIKE, MARVIN 34987 ROMAR ST. DADE CITY, FL 33523 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Brenda Moody 34984 Fraser St. Dade City, FL 33523 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VERMEULEN, RONALD 34998 HAWKIOWE RD. DADE CITY, FL 33523 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Willis B. Whalen 34992 Fraser St. Dade City, FL 33523 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 49, 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: <i>David B. Moore</i> DAVID B. MOORE		FEB. 13, 2006 352583 3054	
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

60017391



02122006 Chg-NP CR2E037 (11/05)

4. FEI Number 52-1328570 Applied For Not Applicable

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

ATTACHMENT
 60017391
 #732041

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BOECKMAN, BUTCH 35010 ROMAR ST. DADE CITY, FL 33523	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Helen R. Farrar 34990 Hawkiowa Rd. Dade City, FL 33523	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WHALEN, SHIRLEY 34992 FRASER ST. DADE CITY, FL 33523	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RICHARDSON, LOWELL 34979 FRASER STREET DADE CITY, FL 33523	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STRIKE, MARVIN 34987 ROMAR ST. DADE CITY, FL 33523	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VERMEULEN, RONALD 34998 HAWKOWE RD. DADE CITY, FL 33523	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition