

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737053

FILED  
Apr 20, 2011  
Secretary of State

**Entity Name:** CURLEW MOBILE HOME ESTATES ASSOCIATION, INC.

**Current Principal Place of Business:**

28100 US HIGHWAY 19 N  
SUITE 205  
CLEARWATER, FL 33761

**New Principal Place of Business:**

7300 PARK STREET  
SEMINOLE, FL 33777

**Current Mailing Address:**

28100 US HIGHWAY 19 N  
SUITE 205  
CLEARWATER, FL 33761

**New Mailing Address:**

7300 PARK STREET  
SEMINOLE, FL 33777

**FEI Number:** 59-2267070

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RESOURCE PROPERTY MANAGEMENT, INC.  
28100 US HIGHWAY 19 N  
SUITE 205  
CLEARWATER, FL 33761 US

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

REINHARDT, DEBBIE  
7300 PARK STREET  
SEMINOLE, FL 33777 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: DEBBIE REINHARDT

04/20/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: FIGGS, SANDY  
Address: 2755 CURLEW RD. #78  
City-St-Zip: PALM HARBOR, FL 34684

Title: DVP  
Name: VOSS, SHEILA  
Address: 2755 CURLEW RD. # 36  
City-St-Zip: PALM HARBOR, FL 34684

Title: DS  
Name: MONTEONE, JOE  
Address: 2755 CURLEW ROAD, #156  
City-St-Zip: PALM HARBOR, FL 34684

Title: DT  
Name: GILRAY, PENNY  
Address: 2755 CURLEW ROAD, # 44  
City-St-Zip: PALM HARBOR, FL 34684

Title: D  
Name: MCLINN, PHYLLIS  
Address: 2755 CURLEW ROAD, #89  
City-St-Zip: PALM HARBOR, FL 34684

Title: D  
Name: SPENCER, RICHARD  
Address: 2755 CURLEW ROAD, #34  
City-St-Zip: PALM HARBOR, FL 34684

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SANDY FIGGS

DP

04/20/2011

Electronic Signature of Signing Officer or Director

Date