2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2002 8:00 AM
Secretary of State

DOCUMENT# 737214

Entity Name: BRIAR CREEK MOBILE HOME COMMUNITY I, INC.

Current Principal Place of Business:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

New Principal Place of Business:

Current Mailing Address:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

New Mailing Address:

FEI Number: 59-1718777 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REARDON, MAUREEN C
4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 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:	PD	( ) Delete
Name:	MCLAUGHLIN, GEORGE	
Address:	152 BEECHWOOD DRIVE	
City-St-Zip:	SAFETY HARBOR, FL 34695	
Title:	TD	( ) Delete
Name:	MCEVOY, ROBERT	
Address:	140 THISTLE BRIAR DR.	
City-St-Zip:	SAFETY HARBOR, FL 34695	
Title:	VD	( ) Delete
Name:	LOUDENSLAGER, GEORGE	
Address:	30 BIRCH CREEK DRIVE	
City-St-Zip:	SAFETY HARBOR, FL 34695	
Title:	SD	( ) Delete
Name:	DETTMER, AL	
Address:	65 SUGAR BEAR DRIVE	
City-St-Zip:	SAFETY HARBOR, FL 34695	
Title:	D	( ) Delete
Name:	ROGERS, GERALD	
Address:	86 SUGAR BEAR DRIVE	
City-St-Zip:	SAFETY HARBOR, FL 34695	
Title:	D	( ) Delete
Name:	LANDON, GIL	
Address:	38 STAG RUN COURT	
City-St-Zip:	SAFETY HARBOR, FL 34695	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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

SIGNATURE: GEORGE MCLAUGHLIN PD 03/20/2002

Electronic Signature of Signing Officer or Director — Date