2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741238

in the State of Florida.

Apr 20, 2009 Secretary of State

Entity Name: FLORIDA MOBILE HOME AND MANUFACTURED HOUSING POLITICAL ACTION COMMITTEE, INC.

Current Principal Place of Business: New Principal Place of Business:

2958 WELLINGTON CR NO 2958 WELLINGTON CR NO

SUITE 100 SUITE 100

TALLAHASSEE, FL 32308 US TALLAHASSEE, FL 32309 US

Current Mailing Address: New Mailing Address:

2958 WELLINGTON CR NO 2958 WELLINGTON CR NO

SUITE 100 SUITE 100

TALLAHASSEE, FL 32308 US TALLAHASSEE, FL 32309 US

FEI Number: 59-2264899 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

AYOTTE, JAMES R
7983 LOCHKNOLL LANE
TALLAHASSEE, FL 32312 US
AYOTTE, JAMES R
1112 LOCHKNOLL COURT
TALLAHASSEE, FL 32312 US
TALLAHASSEE, FL 32312 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

SIGNATURE: JAMES R. AYOTTE 04/20/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: C () Delete Title: C (X) Change () Addition

 Name:
 CASHIN, KEN MR.
 Name:
 CASHIN, KEN MR.

 Address:
 732 BLOUNTSTOWN HWY
 Address:
 916 N. MONROE STREET

 City-St-Zip:
 TALLAHASSEE, FL 32304
 City-St-Zip:
 TALLAHASSEE, FL 32303

Title: T () Delete Title: () Change () Addition

 Name:
 AYOTTE, JAMES
 Name:

 Address:
 2958 WELLINGTON CIR NO SUITE 100
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32309
 City-St-Zip:

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

SIGNATURE: JAMES R. AYOTTE RA 04/20/2009