

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 17, 1999 8:00 am  
Secretary of State

03-17-1999 90140 019 \*\*\*\*61.25

0074975

DOCUMENT # 745960

1. Corporation Name

PLEASURE COVE MOBILE HOME OWNERS, INC.

Principal Place of Business

3030 S US #1  
FT. PIERCE FL 34982  
US

Mailing Address

6 SUNSHINE AVE  
FT. PIERCE F 34982  
US



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

02/15/1979

4. FEI Number

59-2047382

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

DAWSON, ROBERT  
33 SERENDIPITY AVE  
FT. PIERCE FL 34982

10. Name and Address of New Registered Agent

81

Name

Jean E. Donahue

82

Street Address (P.O. Box Number is Not Acceptable)

6 Sunshine Ave

83

84

City

Ft. Pierce

FL

85 Zip Code

34982

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

*Jean E. Donahue*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/17/99  
DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE  
NAME DAWSON, ROBERT  
STREET ADDRESS 33 SERENDIPITY AVE  
CITY-ST-ZIP FT PIERCE, FL 00000

TITLE V ☐ DELETE  
NAME DEMONDE, CHARLES  
STREET ADDRESS 31 PLEASURE AVE  
CITY-ST-ZIP FT. PIERCE FL 34982

TITLE D ☐ DELETE  
NAME KING, ELAINE  
STREET ADDRESS 10 LAZY LANE  
CITY-ST-ZIP FT PIERCE, FL 00000

TITLE T ☐ DELETE  
NAME FRIDLEY, WAYNE  
STREET ADDRESS 52 SERENDIPITY AVE  
CITY-ST-ZIP FT. PIERCE FL

TITLE S ☐ DELETE  
NAME LINN, JESSIE  
STREET ADDRESS 10 SUNSHINE AVE  
CITY-ST-ZIP FT PIERCE, FL 00000 34982

TITLE D ☐ DELETE  
NAME JACKSON, ALBERT  
STREET ADDRESS 69 SUNSHINE AVE  
CITY-ST-ZIP FT PIERCE, FL 00000 34982

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition  
1.2 NAME Jean E. Donahue  
1.3 STREET ADDRESS 6 Sunshine Ave  
1.4 CITY-ST-ZIP Ft Pierce, FL 34982

2.1 TITLE V ☒ Change ☐ Addition  
2.2 NAME Waldo McDowell  
2.3 STREET ADDRESS 54 Sunshine Ave  
2.4 CITY-ST-ZIP Ft. Pierce, FL 34982

3.1 TITLE D ☒ Change ☐ Addition  
3.2 NAME James Collins  
3.3 STREET ADDRESS 57 Pleasure Ave  
3.4 CITY-ST-ZIP Ft. Pierce, FL 34982

4.1 TITLE T ☒ Change ☐ Addition  
4.2 NAME Margaret Hauer  
4.3 STREET ADDRESS 50 Sunshine Ave  
4.4 CITY-ST-ZIP Ft. Pierce, FL 34982

5.1 TITLE S ☒ Change ☐ Addition  
5.2 NAME Joan Zalot  
5.3 STREET ADDRESS 68 Pleasure Ave  
5.4 CITY-ST-ZIP Ft. Pierce, FL 34982

6.1 TITLE D ☒ Change ☐ Addition  
6.2 NAME John Butler  
6.3 STREET ADDRESS 1 Leisure Ln  
6.4 CITY-ST-ZIP Ft. Pierce, FL 34982

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jean E. Donahue*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/99  
Date

(561) 466-6579  
Daytime Phone #

CR2E037 (11/98)

PLEASURE COVE  
3030 S. US #1  
Ft. Pierce, FL 34982

243192-90140-19  
745960

Block 13 - continued

7.1Title D  
7.2Name Gerri Demonde  
7.3Addr. 31 Pleasure Ave  
7.4City Ft. Pierce, FL 34982