

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749360

FILED
Mar 03, 2009
Secretary of State

Entity Name: TROPICAL MOBILE HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

37407 RAY DRIVE
ZEPHYRHILLS, FL 33541 US

New Principal Place of Business:

Current Mailing Address:

SHERRY BLEDSOE
37444 TROPICAL DR
ZEPHYRHILLS, FL 33541 US

New Mailing Address:

FEI Number: 59-2349982 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HAANDE HIRSCH, ELLEN
2401 W BAY DR STE 414
LARGO, FL 33770 US

Name and Address of New Registered Agent:

DOLAN, RACHEL G
37250 HAMMOND DRIVE
ZEPHYRHILLS, FL 33541 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: RACHEL G DOLAN

03/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOLLINSHEAD, GERALD
Address: 37322 BURDOCK DR
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: VP () Delete
Name: ALAN, SMITH
Address: 37419 HAMMOND DR
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: S () Delete
Name: GARDNER, VIRGINIA
Address: 4819 KENT DR
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: T () Delete
Name: BLEDSOE, SHERRY
Address: 37444 TROPICAL DR
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: D () Delete
Name: JENSEN, VAUGHN
Address: 37312 TROPICAL DR
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: D () Delete
Name: JAMES, DEAN
Address: 37406 RAY DR
City-St-Zip: ZEPHYRHILLS, FL 33541

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
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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 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: SHERRY BLEDSOE

T

03/03/2009

Electronic Signature of Signing Officer or Director

Date