

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749360

FILED
Apr 06, 2012
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:

37407 RAY DRIVE
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:

DOLAN, RACHEL G
37250 HAMMOND DRIVE
ZEPHYRHILLS, FL 33541 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: P
Name: DOLAN, RACHEL
Address: 37250 HAMMOND DR
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: VP
Name: HOLT, CHARLOTTE
Address: 37300 TROPICAL DRIVE
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: S
Name: LARSEN, KAREN
Address: 37248 KINKAID DR
City-St-Zip: ZEPHYRHILLS, FL 33541

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

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

Title: D
Name: NORTHRUP, DONNA
Address: 37417 RAY DR
City-St-Zip: ZEPHYRHILLS, FL 33541

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: RACHEL DOLAN

PRES

04/06/2012

Electronic Signature of Signing Officer or Director

Date