

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 752057

1. Entity Name

HILLSIDE PARK MOBILE HOME OWNERS ASSN., INC

FILED
Mar 28, 2001 8:00 am
Secretary of State

03-28-2001 90005 044 ****61.25

00029257

DO NOT WRITE IN THIS SPACE

Principal Place of Business
123 McMullen Booth Rd.
#233
Clearwater, FL. 33759
US

Mailing Address
123 McMullen Booth Rd.
#233
Clearwater, FL. 33759
US

2. Principal Place of Business
123 McMullen Booth Rd.
Suite, Apt. #, etc.
-233

3. Mailing Address
123 McMullen Booth Rd.
Suite, Apt. #, etc.
233

City & State
Clearwater FL

City & State
Clearwater, FL

Zip
33759

Country
USA

Zip
33759

Country
USA

4. FEI Number

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GIRADIN, HARVEY
123 McMullen Booth Rd
#233
Clearwater, FL. 33759

Name
Harvey Girardin

Street Address (P.O. Box Number is Not Acceptable)
123 McMullen Booth Rd.

Lot 233

City
Clearwater, FL Zip Code
33759

8. 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 HARVEY GIRARDIN

Signature, typed or printed name of registered agent and title if applicable

Harvey Girardin CO

(NOTE: Registered Agent signature required when reinstating)

18/3/2001
DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to:
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P NAME STREET ADDRESS CITY-ST-ZIP	Kinseher, Richard 123 McMullen Booth Rd #129 Clearwater, FL 33759	<input checked="" type="checkbox"/> Delete
TITLE VP NAME STREET ADDRESS CITY-ST-ZIP	Overman, Joann 123 McMullen Booth Rd. #211 Clearwater, FL. 33759	<input checked="" type="checkbox"/> Delete
TITLE S NAME STREET ADDRESS CITY-ST-ZIP	Wells, Lila 123 McMullen Booth Rd. #209 Clearwater, FL 33759	<input type="checkbox"/> Delete
TITLE T NAME STREET ADDRESS CITY-ST-ZIP	Edone, Dawn 123 McMullen Booth Rd #110 Clearwater, FL. 33759	<input checked="" type="checkbox"/> Delete
TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Jones, Joe 123 McMullen Booth Rd. #241 Clearwater, FL. 33759	<input checked="" type="checkbox"/> Delete
TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Foley, Eric 123 McMullen Booth Rd. #105 Clearwater, FL 33759	<input checked="" type="checkbox"/> Delete

TITLE P NAME STREET ADDRESS CITY-ST-ZIP	Girardin, Harvey 123 McMullen Booth Rd. Clearwater, FL #233 33759	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VP NAME STREET ADDRESS CITY-ST-ZIP	Wallace, Donna 123 McMullen Booth Rd #133 Clearwater, FL 33579	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE S NAME STREET ADDRESS CITY-ST-ZIP	Wells, Lila 123 McMullen Booth Rd # 209 Clearwater, FL. 33759	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE T NAME STREET ADDRESS CITY-ST-ZIP	Thiesing, Albert J. 123 McMullen Booth Rd. #116 Clearwater, FL. 33759	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Jerigan, Jim 123 McMullen Booth Rd #137 Clearwater, FL. 33759	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Grim, Lillian 123 McMullen Booth Rd #235 Clearwater, FL. 33759	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Harvey Girardin CO*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

18-3-2001

Date

Daytime Phone #

CR2E037 (11/00)