

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752057

FILED
Jan 31, 2009
Secretary of State

Entity Name: HILLSIDE PARK MOBILE HOME OWNERS ASSN., INC.

Current Principal Place of Business:

123 S. MCMULLEN BOOTH RD.
LOT 219
CLEARWATER, FL 33759 US

New Principal Place of Business:

Current Mailing Address:

123 S. MCMULLEN BOOTH RD.
LOT 219
CLEARWATER, FL 33759 US

New Mailing Address:

FEI Number: 59-2392316

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEASLEY, RAY
123 S. MCMULLEN BOOTH RD.
LOT 219
CLEARWATER, FL 33759 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: PRES () Delete
Name: BEASLEY, RAY
Address: 123 S. MCMULLEN BOOTH RD.
City-St-Zip: CLEARWATER, FL 33759 US

Title: VP () Delete
Name: WELLINGTON, PAUL
Address: 123 S. MCMULLEN BOOTH RD.
City-St-Zip: CLEARWATER, FL 33759 US

Title: TRES () Delete
Name: SAYERS, VONNI
Address: 123 S. MCMULLEN BOOTH RD.
City-St-Zip: CLEARWATER, FL 33759 US

Title: DIR () Delete
Name: COLLINGSWORTH, LARRY
Address: 123 S. MCMULLEN BOOTH RD.
City-St-Zip: CLEARWATER, FL 33759 US

Title: DIR () Delete
Name: SMITH, NEIL
Address: 123 S. MCMULLEN BOOTH RD.
City-St-Zip: CLEARWATER, FL 33759 US

Title: DIR () Delete
Name: NOWAK, JIM
Address: 123 S. MCMULLEN BOOTH RD.
City-St-Zip: CLEARWATER, FL 33759 US

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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Address:
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: RAY BEASLEY

PRES

01/31/2009

Electronic Signature of Signing Officer or Director

Date