

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752310

FILED  
Mar 17, 2011  
Secretary of State

**Entity Name:** SEMINOLE MOBILE HOME OWNERS CIVIC ASSOCIATION, INC.

**Current Principal Place of Business:**

5015 SEMINOLE BLVD.  
LOT 225  
ST. PETERSBURG, FL 33708 US

**New Principal Place of Business:**

**Current Mailing Address:**

5015 SEMINOLE BLVD.  
LOT 225  
ST. PETERSBURG, FL 33708 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HALLMAN, DAN  
5015 SEMINOLE BLVD.  
LOT 225  
ST. PETERSBURG, FL 33708 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: HALLMAN, DAN  
Address: 5015 SEMINOLE BLVD. #225  
City-St-Zip: ST. PETERSBURG, FL 33708 US

Title: S  
Name: WALTERS, DIANA  
Address: 5015 SEMINOLE BLVD. #100  
City-St-Zip: ST. PETERSBURG, FL 33708 US

Title: T  
Name: RIDDLE, FRED  
Address: 5015 SEMINOLE BLVD. #115  
City-St-Zip: ST. PETERSBURG, FL 33708 US

Title: D  
Name: SCOTT, ROBERT  
Address: 5015 SEMINOLE BLVD, #116  
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: VP  
Name: CHAISSON, JANICE  
Address: 5015 SEMINOLE BLVD., #120  
City-St-Zip: SAINT PETERSBURG, FL 33708

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: DAN HALLMAN

P

03/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date