

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766421

FILED
Apr 10, 2012
Secretary of State

Entity Name: MOBILE MANOR, INC.

Current Principal Place of Business:

8359 BEACON BLVD
313
FT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

8359 BEACON BLVD
313
FT MYERS, FL 33907

New Mailing Address:

FEI Number: 59-2253739

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYDEN & ASSOCIATES, INC.
8359 BEACON BLVD
313
FORT MYERS, FL 33907 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: PD
Name: FOUNTAINE, BOB
Address: 8359 BEACON BLVD
City-St-Zip: FORT MYERS, FL 33907

Title: SD
Name: KINDER, LONA
Address: BEACON BLVD
City-St-Zip: FORT MYERS, FL 33907

Title: TD
Name: GILLILAND, SANDRA
Address: 8359 BEACON BLVD
City-St-Zip: FORT MYERS, FL 33907

Title: VD
Name: SCHAEFFER, GARY
Address: 8359 BEACON BLVD
City-St-Zip: FORT MYERS, FL 33907

Title: D
Name: WAYNE, HARVEY
Address: BEACON BLVD
City-St-Zip: FORT MYERS, FL 33907

Title: D
Name: HAWKINS, TOM
Address: 8359 BEACON BLVD
City-St-Zip: FORT MYERS, FL 33907

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: BOB FOUNTAINE

P

04/10/2012

Electronic Signature of Signing Officer or Director

Date