2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766437

FILED Jan 17, 2012 Secretary of State

Entity Name: AQUA ISLES MOBILE HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

900 AQUA ISLES BLVD

B-17

LABELLE, FL 33935 US

Current Mailing Address: New Mailing Address:

900 AQUA ISLES BLVD B-17

LABELLE, FL 33935 US

FEI Number: 59-2348480 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TOLER, OLIVIA W 900 AQUA ISLES BLVD LOT B-17 LABELLE, FL 33935 US

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: F

Name: KING, FAYE

Address: 900 AQUA ISLES BLVD, LOT A-22

City-St-Zip: LABELLE, FL 33935 US

Title: S

Name: BRUCE, LANE

Address: 900 AQUA ISLES BLVD, LOT B-16

City-St-Zip: LABELLE, FL 33935 US

Title: 7

Name: TOLER, OLIVIA W

Address: 900 AQUA ISLES BLVD., LOT B-17

City-St-Zip: LABELLE, FL 33935 US

Title:

Name: MILLER, LINDA

Address: 900 AQUA ISLES BLVD, D-12 City-St-Zip: LABELLE, FL 33935 US

Title:

Name: HOLDAWAY, JIM

Address: 900 AQUA ISLES BLVD, LOT C-19

City-St-Zip: LABELLE, FL 33935 US

Title: VP

Name: SPAULDING, RON

Address: 900 AQUA ISLES BLVD E-22 City-St-Zip: LABELLE, FL 33935 US

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: OLIVIA TOLER T 01/17/2012