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**Mar 09, 1999 8:00 am**  
**Secretary of State**

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NONPROFIT  
 CORPORATION  
 ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # 767428**

1. Corporation Name

**HILLSBORO MOBILE HOME OWNERS ASSOCIATION, INC.**

Principal Place of Business

5335 W HILLSBORO BLVD  
 LOT 901  
 COCONUT CREEK FL 33073  
 US

Mailing Address

5335 W HILLSBORO BLVD  
 LOT 901  
 COCONUT CREEK FL 33073  
 US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 29 30

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

03/11/1983

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
 Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be  
 Added to Fees

9. Name and Address of Current Registered Agent

LEUBA, DALLAS  
 5335 W HILLSBORO BLVD.  
 LOT 901  
 COCONUT CREEK FL 33073

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Dallas Leuba

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

Dallas Leuba

(NOTE: Registered Agent signature required when reinstating)

2/23/99

DATE

12.

OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME CARTER, EDWARD  
 STREET ADDRESS 5335 WEST HILLSBORO BLVD., LOT 216  
 CITY-ST-ZIP COCONUT CREEK FL

TITLE SD ☐ DELETE

NAME KILBARGER, DIANE  
 STREET ADDRESS 5335 W HILLSBORO BLVD, #822  
 CITY-ST-ZIP COCONUT CREEK FL

TITLE VD ☐ DELETE

NAME AVELLINO, KAY  
 STREET ADDRESS 5335 WEST HILLSBORO BLVD., LOT 902  
 CITY-ST-ZIP COCONUT CREEK FL

TITLE VD ☐ DELETE

NAME FARNSWORTH, JAN  
 STREET ADDRESS 5335 W HILLSBORO BLVD, #810  
 CITY-ST-ZIP COCONUT CREEK FL

TITLE TD ☐ DELETE

NAME LEFERRIERE, MARGE  
 STREET ADDRESS 5335 WEST HILLSBORO BLVD. LOT 709  
 CITY-ST-ZIP COCONUT CREEK FL

TITLE ☐ DELETE

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: E. Diane Kilbarger

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/23/99

DATE

954-481-2971

Daytime Phone #

CR2E037 (11/98)