2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 19, 2004 8:00 am Secretary of State

04-19-2004 90308 007 ****70 00

1. Entity Nam	MEN # 767828 PIPITY MOBILE HOMEOWN			04-19-200	4 90308 00)'/ ****'/	70.00		
8793 LITTLE	e of Business TON RD. T MYERS, FL 33903 US	Mailing Address 8793 LITTLETON RD. NORTH FORT MYERS, FL	33903 US			متحضت بتديب	محاد السند	<u> </u>	
2. Principal P	Pace of Business	3. Mailing Address	· · · · · · · · · · · · · · · · · · ·						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04142004	Chg-NP	CR2E037	(10/02)		
City & State		City & State		4. FEI Numbe	<u> </u>	Ch2EWI		plied For	
Zip Country		Žip Country			59-2354734 Not Applicable 5. Certificate of Status Desired \$8.75 Additional				
	6 Nema and Aridress of Current	Registered Agent			· · · · · · · · · · · · · · · · · · ·		e Required	1	
6. Name and Address of Current Registered Agent			Name	7. Name and Address of New Registered Agent Name					
TIDWELL, ALBERT L 10480 STRINGFELLOW RD SUITE 2			Street A	Street Address (P.O. Box Number is Not Acceptable)					
	MES CITY, FL 33956	্র্ক ক							
			City			FL	Zip Code	•	
	e named entity submits this statement for tions of registered agent.	or the pulpose of changing its i	egistered office of	registered agent, or wo	in, in the state of Fi	онса. гаппа	rimar wilii,	апи ассері	
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE:	Registered Agent signet	use required when reinstating)		DATE			
SIGNATURE	Sgneture, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2004	<u>a</u> T	paign Financing	\$5.00 May B Added to Fees	re	DATE fake check rida Departo		,	
10.	Filing Fee is \$61.25	9. Election Cam Trust Fund C	paign Financing ontribution.	\$5.00 May B Added to Fees	re	fake check i rida Departo	nent of St	ate	
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10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2004 OFFICERS AND DI D HOBART, CARL 336 ENCORE DR	9. Election Cam Trust Fund C	paign Financing ontribution. 11. TITLE SD NAME STREET ADDRESS	S5.00 May B Added to Fees ADDITIONS/CH. Jean Reems: 267 Moonwin	ANGES TO OFFICE myder and Dr. rs,F1. 339	fake check ride Departm ERS AND DIRE	CTORS IN	10	
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attackment with an address, with all other like empowered.

SIGNATURE: NUSSEL KING WINSELL Song PRES 4/14/04 239-995-778

Description of Dispersion of Browning Of