2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#813381

Name:

Address:

City-St-Zip:

ROZZANO, ANN M

7444 ELEANOR CIR.

SARASOTA, FL 34243

Entity Name: ROGERS MOBILE HOMES PARK, INC.

FILED Apr 30, 2009 Secretary of State

•			-, ···		
Current P	rincipal Pla	ce of Business:	New Principal Place	New Principal Place of Business:	
	OCKWOOD F A, FL 3423				
Current N	lailing Addı	ress:	New Mailing Addres	New Mailing Address:	
	OCKWOOD F A, FL 3423				
FEI Number	: 59-0863994	FEI Number Applied For	() FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address o	f Current Registered Age	nt: Name and Address	Name and Address of New Registered Agent:	
SARASOT The above in the State	e of Florida.	O US	or the purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU		onic Signature of Register	ed Agent	 Date	
Election Ca	mpaign Financ	ing Trust Fund Contribution ().		
OFFICER	S AND DIRE	ECTORS:	ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	TSD ROZZANO, I 3223 N LOC SARASOTA,	KWOOD RIDGE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD ROZZANO, 3 3223 N LOC SARASOTA,	KWOOD RIDGE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	VP	() Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: ANNMAUREEN ROZZANO VP 04/30/2009