

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18459

FILED
Jan 19, 2009
Secretary of State

Entity Name: CLAIR MAR MOBILE HOME PARK, INC.

Current Principal Place of Business:

118 CLAIRMAR CIR
U.S. HWY 27
DAVENPORT FL, 33837

New Principal Place of Business:

118 CLAIRMAR CIR
U.S. HWY 27
DAVENPORT, FL 33837

Current Mailing Address:

118 CLAIRMAR CIR
U.S. HWY 27
DAVENPORT FL, FL 33837

New Mailing Address:

FEI Number: 59-2168277 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROFESSIONAL TAX CONSULTANTS, INC
112 AVENUE E SW
WINTER HAVEN, FL 33881 US

Name and Address of New Registered Agent:

PROFESSIONAL TAX CONSULTANTS, INC
314 AVENUE K SE
WINTER HAVEN, FL 33881 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: NORMA J BEAVER EA

01/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: THELEN, PATRICK,
Address: 9915 W COLONY ROAD
City-St-Zip: FOWLER, MICHIGAN 00000,

Title: D () Delete
Name: BOAK, MARY JANE,
Address: 8475 PRICE ROAD
City-St-Zip: ST JOHNS, MICHIGAN 00000,

Title: D () Delete
Name: THELEN, CHRIS,
Address: 9915 W COLONY ROAD
City-St-Zip: FOWLER, MICHIGAN 00000,

Title: DP () Delete
Name: THELEN, CLAIR L,
Address: 9915 W COLONY ROAD
City-St-Zip: FOWLER, MICHIGAN 00000,

Title: DT () Delete
Name: THELEN, MARGARET,
Address: 9915 W COLONY ROAD
City-St-Zip: FOWLER, MICHIGAN 00000,

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS (X) Change () Addition
Name: THELEN, PATRICK
Address: 1469 HIDDEN VALLEY, APT 9
City-St-Zip: KENTWOOD, MI 49508

Title: D (X) Change () Addition
Name: BOAK, MARY JANE
Address: 8475 PRICE ROAD
City-St-Zip: ST JOHNS, MI 48879

Title: D (X) Change () Addition
Name: THELEN, CHRIS,
Address: 9915 W COLONY ROAD
City-St-Zip: FOWLER,, MI

Title: DP (X) Change () Addition
Name: THELEN, CLAIR L,
Address: 118 CLAIR MAR CIRCLE
City-St-Zip: DAVENPORT, FL 33837

Title: DT (X) Change () Addition
Name: THELEN, MARGARET,
Address: 118 CLAIR MAR CIRCLE
City-St-Zip: DAVENPORT, FL 33837

Title: PRES () Change (X) Addition
Name: THELEN, CLAIR L
Address: 118 CLALIRMAR CIRCLE
City-St-Zip: DAVENPORT, FL 33837

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.

SIGNATURE: CLAIR L THELEN

PRES

01/19/2009

Electronic Signature of Signing Officer or Director

Date