

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18459

FILED
Jan 29, 2011
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:

Current Mailing Address:

201 E. STURGIS ST
ST JOHNS, MI 48879

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
314 AVENUE K SE
WINTER HAVEN, FL 33881 US

Name and Address of New Registered Agent:

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: DS
Name: THELEN, PATRICK
Address: 1469 HIDDEN VALLEY, APT 9
City-St-Zip: KENTWOOD, MI 49508

Title: PRES
Name: BOAK, MARY JANE
Address: 8475 PRICE ROAD
City-St-Zip: ST JOHNS, MI 48879

Title: D
Name: THELEN, CHRIS
Address: 9915 W COLONY ROAD
City-St-Zip: FOWLER,, MI

Title: D
Name: OLIN, JOANNE
Address: 1865 YOSEMITE DR
City-St-Zip: OKEMOS, MI 48864

Title: DT
Name: THELEN, MARGARET
Address: 118 CLAIR MAR CIRCLE
City-St-Zip: DAVENPORT, FL 33837

Title: D
Name: THELEN, NICKOLAS L
Address: 13720 KINLEY RD
City-St-Zip: FOWLER, MI 48835

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PATRICK THELEN

DS

01/29/2011

Electronic Signature of Signing Officer or Director

Date