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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F92184

SHARP'S MOBILE HOME PARK, INC.

FILED
Jan 29, 1999 8:00am
Secretary of State

01-29-1999 90047 047 ***150.00

Principal Plac	ce of Business	Mailing Address				., 410, 6151, 4161, 6161, 51	,,, e,e,, g,g,, (2e)	
5620-1 LAKE L	LIZZIE DR.	5620-1 LAKE LIZZIE DR.					. *	
ST CLOUD FL	. 34771	ST CLOUD FL 34771)	·		
US US		U\$				DO NOT WRITE IN THIS SPACE		
			•		3. Date Incorporated or Qualifed		•	
					07/27/1982	<u> </u>		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	,	Applied For	
21		26			59-2243337	. []	Not Applicable	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				\$8.75	Additional	
22		27		•	5. Certifcate of Status Desired	□ Fee	Required	
City & Sta	ite	City & State			6. Election Campaign Financing	= \$5.0	O May Be	
23		28			Trust Fund Contribution		d to Fees	
Žíp	Country	Zip	Cour	itry	8. This corporation owes the curre	nt vear Intangible		
24	25	29	30		Personal Property Tax.	⊠rYes	□No	
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New Re	gistered Agent		
	有形式,顶 脊			81 Name				
SH/	ARP, ELIZABETH							
	0-1 LAKE LIZZIE DR.	().		82 Street	Address (P.O. Box Number is Not Acceptate	ole)		
	CLOUD FL 32769		}	83	[18 4 1 8 1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	นาร์สมัยสารสาร์สิทิธิ	संस्थान होता है है	
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11. Pursuant	t to the provisions of Sections 607,050	2 and 607.1508, Florida Statute	s, the ab	ove-named	corporation submits this statement for the poration's board of directors. I hereby accept	ourpose of changing	its registered	
	am familiar with, and accept the obliga				oration's board of directors. Thereby accept	the appointment as	registered	
SIGNATURE	, ,				· ·			
						•		
	Signature, typed or printed name of registered ager			gent signature r	equired when reinstating)	DATE		
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIREC		
	OFFICERS AN							
12.		ID DIRECTORS	13.	E	ADDITIONS/CHANGES TO OFF	ICERS AND DIREC		
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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 607, 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

SIGNATURED SIGNATURED SIGNATURE OF SIGNATURE AND THE OF THE PROPERTY OF SIGNATURE O

Jan 11, 1999

Daytime Phone #

22F0347/11/981