FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H58105** **(8)**

1. Corporation Name

MAS VERDE OF LAKELAND MOBILE HOME OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2600 HARDEN BLVD. BOX #176 LAKELAND FL 33803-5927	2600 HARDEN BLVD. BOX #176 LAKELAND FL 33803-5927

3. Date Incorporated or Qualified: 05/21/1985
3a. Date of Last Report: 03/14/1995

2. Principal Place of Business — 21: Suite, Apt. #, etc. — 22: City & State — 23: Zip — 24: Country — 25
2a. Mailing Address — 26: Suite, Apt. #, etc. — 27: City & State — 28: Zip — 29: Country — 30

4. FEI Number: 59-2645517 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

HENSELY, DONALD E.
2600 HARDEN BLVD
BOX 83
LAKELAND FL 33803

10. Name and Address of New Registered Agent

81 Name: CHARLES LOUIE
82 Street Address (P.O. Box Number is Not Acceptable): 2600 HARDEN BLVD.
83: BOX 130
84 City: LAKELAND FL 85 Zip Code: 33803

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes

SIGNATURE: x Charles Louie President CHARLES LOUIE 2-9-96
Signature (typed or printed name of Registered Agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROBINSON, KEN 2600 HARDEN BLVD #213 LAKELAND FL ☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PRES. CHARLES LOUIE 2600 HARDEN Blvd LOT 130 LAKELAND FLA 33803 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HENSELY, DONALD E. 2600 HARDEN BLVD, BOX 83 LAKELAND FL ☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	VICE PRES FRED CAMERON 2600 HARDEN Blvd LOT 157 LAKELAND FLA, 33803 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD EISOLD VERA 2600 HARDEN BLVD., # 65 LAKELAND FL 33803 ☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	SECRETARY OLGA BUCHHEIM 2600 HARDEN Blvd LOT 73 LAKELAND FLA, 33803 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~TD~~ D SHAW, WILLIAM 2600 HARDEN BLVD, BOX 66 LAKELAND FL ☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	TREAS. M. PEMBER NEWBERRY 2600 HARDEN BLVD LOT 149 LAKELAND FLA 33803 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD IWEN, GEORGE 2600 HARDEN BLVD LAKELAND FL ☒ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: x Charles Louie President CHARLES LOUIE 2-9-96 (941)687-8540
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #