

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H60047

FILED
Jan 12, 2009
Secretary of State

Entity Name: MO-TRAIL MOBILE HOME OWNERS INCORPORATED

Current Principal Place of Business:

5650 NEW TAMPA HWY
119
LAKELAND, FL 33815 US

New Principal Place of Business:

Current Mailing Address:

5650 NEW TAMPA HWY
119
LAKELAND, FL 33815 US

New Mailing Address:

FEI Number: 59-2540965 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIDDLE, VIRGINIA R
565 NEW TAMPA HWY LOT 119
LAKELAND, FL 33815 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EMERY, GWEN
Address: 5600-42 NEW TAMPA HWY
City-St-Zip: LAKELAND, FL 33815

Title: VP () Delete
Name: DAGG, ERIC
Address: 5650-117 NEW TAMPA HWY
City-St-Zip: LAKELAND, FL 33815

Title: SD () Delete
Name: CARLSON, JO A
Address: 5650 NEW TAMPA HWY, #103
City-St-Zip: LAKELAND, FL

Title: TD () Delete
Name: BIDDLE, VIRGINIA R.,
Address: 5650 NEW TAMPA HWY, #119
City-St-Zip: LAKELAND, FL

Title: D () Delete
Name: LAMBERT, SANDRA
Address: 5650 NEW TAMPA HWY #103
City-St-Zip: LAKELAND, FL 33815

Title: D () Delete
Name: HILLIGOSS, VIVIAN
Address: 5600 NEW TAMPA HWY #35
City-St-Zip: LAKELAND, FL 33815

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BOEKHOUT, ARLENE
Address: 5600 NEW TAMPA HWY #37
City-St-Zip: LAKELAND, FL 33815

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: VIRGINIA BIDDLE

Electronic Signature of Signing Officer or Director

TREA

01/12/2009

_____ Date