

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # H61684 (7)

1. Corporation Name

VAGABOND MOBILE HOME OWNER ASSOC., INC.



Principal Place of Business

% FLORENCE FOX
7570 46TH AVE. N. #153
ST. PETERSBURG FL 33709

Mailing Address

% FLORENCE FOX
7570 46TH AVE. N. #153
ST. PETERSBURG FL 33709

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

9. Name and Address of Current Registered Agent

FOX, FLORENCE
7570 46TH AVENUE NORTH
LOT 153
ST. PETERSBURG FL 33709

3. Date Incorporated or Qualified

06/12/1985

3a. Date of Last Report

04/11/1995

4. FEET Number

59-2886107

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

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.05(2) 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, Sections 607.05(5), Florida Statutes.

SIGNATURE

Signature of Registered Agent or Director (Print Name)

Signature of New Registered Agent (Print Name)

Date

12. OFFICERS AND DIRECTORS

TITLE

PD

NAME

STRUBLE, BEATRICE

STREET ADDRESS

7570 46TH AVE., N. #264

CITY-STATE-ZIP

ST. PETERSBURG FL

TITLE

VD

NAME

BEAUCHAMP, JOSEPH

STREET ADDRESS

7570 46TH AVENUE N. #251

CITY-STATE-ZIP

ST. PETERSBURG FL

TITLE

SD

NAME

LEBLANC, MARY

STREET ADDRESS

7570-46TH AVE., N., #137

CITY-STATE-ZIP

ST. PETERSBURG FL

TITLE

TD

NAME

FOX, FLORENCE

STREET ADDRESS

7570 46TH AVENUE N. #153

CITY-STATE-ZIP

ST. PETERSBURG FL

TITLE

D

NAME

NAPIERALA, MARGARET

STREET ADDRESS

7570 46TH AVENUE N. #149

CITY-STATE-ZIP

ST. PETERSBURG FL

TITLE

D

NAME

ROBINSON, EARL

STREET ADDRESS

7570 46TH AVENUE, N. #217

CITY-STATE-ZIP

ST. PETERSBURG FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD

NAME

Stanley Pyatt

STREET ADDRESS

7570 46th Ave. N. #127

CITY-STATE-ZIP

St. Petersburg, FL. 33709

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

NAME

STREET ADDRESS

CITY-STATE-ZIP

NAME

STREET ADDRESS

CITY-STATE-ZIP

NAME

STREET ADDRESS

CITY-STATE-ZIP

NAME

STREET ADDRESS

CITY-STATE-ZIP

NAME

STREET ADDRESS

CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stanley Pyatt 813-541-5984
4-2-96

CR2E034 (12/95)