

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 23 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **H61684** (7)
1. Corporation Name
VAGABOND MOBILE HOME OWNER ASSOC., INC.

Principal Place of Business

Mailing Address

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

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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/12/1985

4. FEI Number

59-2886107

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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 607.0502 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

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 ☐ DELETE

1.1 TITLE D

☐ Change ☒ Addition

NAME FUCHS, DOROTHY
STREET ADDRESS 7570 46TH AVE N #147
CITY-ST-ZIP ST. PETERSBURG FL

12 NAME HALLETT, MURIEL
13 STREET ADDRESS 7570 46th AVE. N. #166
14 CITY-ST-ZIP ST. PETERSBURG, FL. 33709

TITLE ☐ DELETE

2.1 TITLE SD

☒ Change ☐ Addition

NAME MURPHY, HELEN
STREET ADDRESS 7570 46TH AVE N #131
CITY-ST-ZIP ST. PETERSBURG FL

22 NAME MURPHY HELEN
23 STREET ADDRESS 7570 46th Ave. N. #131
24 CITY-ST-ZIP ST. PETERSBURG, FL 33709

TITLE ☐ DELETE

3.1 TITLE PD

☒ Change ☐ Addition

NAME DAVIDGE, NANCIE
STREET ADDRESS 7570 46TH AVE N #279
CITY-ST-ZIP ST. PETERSBURG FL

32 NAME DAVIDGE, NANCIE
33 STREET ADDRESS 7570 46th AVE., N #279
34 CITY-ST-ZIP ST. PETERSBURG, FL. 33709

TITLE ☐ DELETE

4.1 TITLE

☐ Change ☐ Addition

NAME FOX, FLORENCE
STREET ADDRESS 7570 46TH AVENUE N. #153
CITY-ST-ZIP ST. PETERSBURG FL

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☒ DELETE

5.1 TITLE VP

☒ Change ☐ Addition

NAME NAPIERALA, MARGARET
STREET ADDRESS 7570 46TH AVENUE N. #149
CITY-ST-ZIP ST. PETERSBURG FL

5.2 NAME SHOAN MEREDITH
5.3 STREET ADDRESS 7570 46th AVE. N. #176
5.4 CITY-ST-ZIP ST. PETERSBURG, FL. 33709

TITLE ☐ DELETE

6.1 TITLE

☐ Change ☐ Addition

NAME CRESSY, RALPH
STREET ADDRESS 7570 46TH AVE N #132
CITY-ST-ZIP ST. PETERSBURG FL

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE NANCIE DAVIDGE, PRES.

Nancie Davidge

4/15/98 813 541 7617

CR2E034 (10/97)