2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2009
Secretary of State

DOCUMENT# H62384

Entity Name: ROSE LAKE ESTATES MOBILE HOME OWNERS ASSOCIATION, INCORPORATED

Current Principal Place of Business:

210 N. PINE AVENUE
TAMPA, FL 33613 US

New Principal Place of Business:

Current Mailing Address:

210 N. PINE AVENUE
TAMPA, FL 33613 US

New Mailing Address:

FEI Number: 59-2641016 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CALDWELL, LEORA
210 N. PINE DRIVE
TAMPA, FL 33613 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: CALDWELL, JERRY
Address: 210 N. PINE DR
City-St-Zip: TAMPA, FL 33613

Title: T ( ) Delete
Name: CALDWELL, LEORA
Address: 210 NORTH PINE DR.
City-St-Zip: TAMPA, FL 33613

Title: S ( ) Delete
Name: VINGLING, DEBORAH
Address: 235 SUN VALLEY
City-St-Zip: TAMPA, FL 33613

Title: D ( ) Delete
Name: MIDDLETON, CYNTHIA
Address: 224 PALM DRIVE
City-St-Zip: TAMPA, FL 33613

Title: VP ( ) Delete
Name: SUPAK, MICHAEL
Address: 214 SUNSET CIRCLE
City-St-Zip: TAMPA, FL 33613

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:

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: LEORA B. CALDWELL TREA 04/03/2009

Electronic Signature of Signing Officer or Director Date