

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2005 8:00 am
Secretary of State

03-28-2005 90045 048 ***158.75

DOCUMENT # H84929 1. Entity Name WALL SPRINGS MOBILE HOME PARK HOMEOWNER'S ASSOCIATION, INC.					
Principal Place of Business 604 HILLSBOROUGH STREET PALM HARBOR, FL 34683-8631			Mailing Address 604 HILLSBOROUGH STREET PALM HARBOR, FL 34683-8631		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2605743	
Zip		Country		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NEWTOWN, GARRY 604 HILLSBOROUGH ST LOT #36 PALM HARBOR, FL 34683				7. Name and Address of New Registered Agent Name Eugene Quackenbush Street Address (P.O. Box Number is Not Acceptable) 604 Hillsborough St. City Palm Harbor State FL Zip 34683	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Eugene Quackenbush (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCMILLAN, MILTON 604 HILLSBOROUGH ST PALM HARBOR, FL 34683	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WILEST, WILLIAM 604 HILLSBOROUGH ST PALM HARBOR, FL 34683	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MILLER, JOYCE 604 HILLSBOROUGH ST PALM HARBOR, FL 34683	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOWARD, LEROY 604 HILLSBOROUGH ST PALM HARBOR, FL 34683	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. FRAN NAUMANN 604 Hillsborough St. PALM HARBOR, FL 34683 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S POWELL, CHANDLER 604 HILLSBOROUGH ST PALM HARBOR, FL 34683	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUBIE, DELORES 604 HILLSBOUROUGH S T PALM HARBOR, FL 34683	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE Joyce Miller Joyce Miller, TREAS. 3/25/05 944 3280 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					