CORPORATION ANNUAL REPORT 1995

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

FILED
95 MAR 27 PM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #H91931

1. Corporation Name

WHITE OAKS MOBILE HOME PARK INC.

300001443183
-03/29/95--01095--011
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
3920 SW 30th ST. OCALA, FL.	P.O. BOX 1264 BRADENTON, FL 34206

3. Date Incorporated or Qualified: 1985
3a. Date of Last Report: MARCH 1994

2. Principal Place of Business	2a. Mailing Address
21 3920 SW 30TH ST.	26 P.O. BOX 1264
22 Suite, Apt. #, etc	27 Suite, Apt. #, etc
23 City & State: OCALA, FL	28 City & State: BRADENTON FL
24 Zip:	25 Country:
29 Zip: 34206	30 Country: USA

4. FEI Number: 59-2644787 ☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BETTY JOAN HETT #32 TWIN SHORES ROSDAT LONGBOAT KEY, FL 34228	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: [illegible] NEW Registered Agent's signature required when designated DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY ST ZIP	PRESIDENT BETTY JOAN HETT P.O. BOX 1264 BRADENTON, FL 34206 N/A	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY ST ZIP	☐ Change ☐ Addition JPA 3-27

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Betty Joan Hett, President — 3/7/95 — (813)383-0384
SIGNATURE AND TITLE OR PRINTED NAME OF RICHARD OFFICER OR DIRECTOR — Date — Daytime Phone #
BETTY JOAN HETT PRES.