

FILED

Sep 02, 2002 8:00 am
Secretary of State

07-16-2002 90350 003 ***550.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J22484

1. Entity Name

WOODBIDGE MOBILE HOME OWNERS, INC.

Principal Place of Business

11055 SE FEDERAL HWY #15
HOBE SOUND FL 33455
US

Mailing Address

11055 SE FEDERAL HWY #15
HOBE SOUND FL 33455
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

BONAN, ELIZABETH P ESQ.
CORNETT, GOUGE, ROSS & EARLE, P.A.
401 EAST OSCEOLA STREET
STUART FL 34994

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P	JEFFERSON, JANE	11055 SE FED. HWY #78	HOBE SOUND FL 33455	<input checked="" type="checkbox"/>
TD	KIRKPATRICK, PATRICIA	11055 S.E. FERAL HWY #68	HOBE SOUND FL	<input checked="" type="checkbox"/>
D	TYLUS, BRUCE	11055 S.E. FEDERAL HWY #90	HOBE SOUND FL	<input type="checkbox"/>
SD	GOODWIN, EDWIN	11055 SE FEDERAL HWY #70	HOBE SOUND FL	<input checked="" type="checkbox"/>
D	DOAK, SAM	11055 SE FED. HWY #31	HOBE SOUND FL 33455	<input type="checkbox"/>
D	WOLFE, WILLIAM	11055 S.E. FED. HWY #3	HOBE SOUND FL 33455	<input checked="" type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
PD	PORTER, HOMER	11055 SE FEDERAL HWY #33	HOBE SOUND, FL 33455	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VPD	WOLFE, BILL	11055 SE FEDERAL HWY #3	HOBE SOUND, FL 33455	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SD	DAVIS, Gilbert	11055 SE Federal Hwy #10	HOBE Sound, FL 33455	<input type="checkbox"/>	<input checked="" type="checkbox"/>
TD	GOLDEN, NORMAN	11055 SE FEDERAL HWY #43	HOBE SOUND, FL 33455	<input type="checkbox"/>	<input checked="" type="checkbox"/>

CR2E034 (4/02)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: NORMAN A. GOLDEN

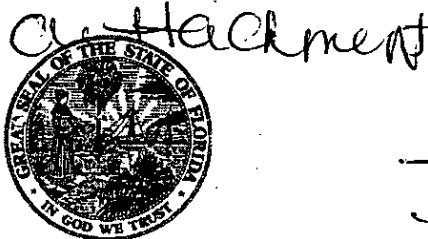
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-10-02

Date

772-546-0320

Daytime Phone #



870534
J22484

FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

JUL 24 2002

July 18, 2002

WOODBIDGE MOBILE HOME OWNERS, INC.
PO BOX 65
JENSEN BEACH, FL 34958 US

Subject: **WOODBIDGE MOBILE HOME OWNERS, INC.**

Reference Number: J22484

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$550.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

List the street address of each officer/director listed on the report or on an attachment.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/JN

ANNUAL REPORTS SECTION