

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J61444

FILED
Jan 23, 2009
Secretary of State

Entity Name: CAP-N-MAC'S MOBILEHOME OWNERS, INC.

Current Principal Place of Business:

8365 MAIN ST
BOKEELIA, FL 339220723 US

New Principal Place of Business:

Current Mailing Address:

8365 MAIN ST
BOKEELIA, FL 339220723 US

New Mailing Address:

FEI Number: 65-0045712

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDGINGTON, ROGER
16918 CAPTAINS DRIVE
BOKEELIA, FL 33922 US

Name and Address of New Registered Agent:

BURKETT, ROBERT D
16958 CAPTAINS DRIVE
BOKEELIA, FL 33922 US

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: ROBERT D. BURKETT

01/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: EDGINGTON, ROGER
Address: 16918 CAPTAINS DR.
City-St-Zip: BOKEELIA, FL 33922

Title: SD () Delete
Name: STAY, PENNY
Address: 16900 FISHERMANS COVE
City-St-Zip: BOKEELIA, FL 33922

Title: PD () Delete
Name: BOCKETT, ROBERT
Address: 16958 CAPTAINS DR.
City-St-Zip: BOKEELIA, FL 33922

Title: D () Delete
Name: STEELE, JERRY
Address: 7 CAPTAINS DR
City-St-Zip: BOKEELIA, FL 33922

Title: TD () Delete
Name: STEELE, DUANE
Address: 16980 FISHERMAN'S COVE
City-St-Zip: BOKEELIA, FL 33922

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: BURKETT, ROBERT
Address: 16958 CAPTAINS DR.
City-St-Zip: BOKEELIA, FL 33922

Title: D (X) Change () Addition
Name: SPEER, ROBERT
Address: 16940 FISHERMENS COVE
City-St-Zip: BOKEELIA, FL 33922

Title: TD (X) Change () Addition
Name: STAY, ROBERT
Address: 16900 FISHERMAN'S COVE
City-St-Zip: BOKEELIA, FL 33922

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: ROBERT D. BURKETT

PD

01/23/2009

Electronic Signature of Signing Officer or Director

Date