

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K17286

FILED
Mar 19, 2010
Secretary of State

Entity Name: HIBISCUS MOBILE HOME PARK, INC.

Current Principal Place of Business:

C/O WILLIAM A MORRISON
3131 W. 16TH AVE
HIALEAH, FL 33012

New Principal Place of Business:

C/O WILLIAM A. MORRISON
3131 W. 16TH AVE
HIALEAH, FL 33012

Current Mailing Address:

C/O WILLIAM A MORRISON
1328 S.W. 14TH STREET
MIAMI, FL 33145

New Mailing Address:

C/O WILLIAM A. MORRISON
1328 S.W. 14TH STREET
MIAMI, FL 33145

FEI Number: 57-0865478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRISON, WILLIAM A DIR.
1328 S.W. 14TH STREET
MIAMI, FL 33145 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: MD
Name: MORRISON, WILLIAM A
Address: 1328 SW 14TH STREET
City-St-Zip: MIAMI, FL 33145

Title: PTD
Name: MORRISON, ALICE
Address: 159 WESTMINSTER DRIVE
City-St-Zip: TAVERNIER, FL 33070

Title: D
Name: MORRISON, RICHARD
Address: 8443 SUMMER FIELD PLACE
City-St-Zip: BOCA RATON, FL 33433

Title: D
Name: TRAINOR, PATRICIA M
Address: 400 JAMES STREET
City-St-Zip: KING OF PRUSSIA, PA 91406

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM A. MORRISON

MD

03/19/2010

Electronic Signature of Signing Officer or Director

Date