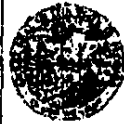


5/5/2003-92183-023-\$50.00-\$50.00

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # L02000024412**1. Entry Name
MOBILE HOME PARK BL LLCFILED
03 JUL 11 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDAPrincipal Place of Business
170 PROSPECT AVENUE, APARTMENT 75
HACKENSACK, NJ 07601Mailing Address
170 PROSPECT AVENUE, APARTMENT 75
HACKENSACK, NJ 07601

2. Principal Place of Business

410 Archer L Reiff PA

3. Mailing Address

410 Archer L Reiff

Suite, Apt. #, etc.

135 West Central Blvd

Suite, Apt. #, etc.

PO Box 1059

City & State

Orlando FL

City & State

Orlando FL

Zip

32801

Country

Orange

Zip

32801

Country

Orange

☐ CHECK HERE IF MAKING CHANGES4. FEI Number
36-4508946Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

KOLTUN, JEFFREY M
667 NORTH WYMORE ROAD, SUITE 100
MAITLAND, FL 32761

7. Name and Address of New Registered Agent

Name
Andrew L. Reiff
Street Address (P.O. Box Number is Not Acceptable)
135 West Central Blvd
Suite 730
City
Orlando FL Zip Code
32801

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 a managing member or manager of the limited liability company and I accept the obligations of registered agent.

SIGNATURE

Andrew L. Reiff

4/29/03

Signatures of registered agent and filer must be signed in the presence of a Notary Public. Registered Agent's signature is required when changing registered agent.

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
RAY, HUGH
170 PROSPECT AVENUE, APARTMENT 75
HACKENSACK, NJ 07601☐ Delete

10. ADDITIONS/CHANGES

☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
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STREET ADDRESS
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CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE:

Hugh Ray Managing Member

4-30-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone

954-370-4305

Andrew L. Reiff, P.A.

ATTORNEY AND COUNSELOR AT LAW

OFFICE LOCATION:
SOUTHTRUST BANK BLDG. SUITE 730
135 W. CENTRAL BLVD.
ORLANDO, FLORIDA 32801
INTERNET: AREIFF3566@AOL.COM

MAILING ADDRESS:
P.O. Box 1059
ORLANDO, FLORIDA 32802-1059
TELEPHONE: (407) 423-8183
FACSIMILE: (407) 425-1508

July 7, 2003

Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

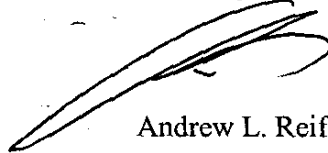
Re: Mobile Home Park III, LLC
Letter number 603A00037988

Dear Sir or Madam:

I am enclosing a copy of the above referenced letter dated June 20, 2003 and the Division's letter dated May 22, 2003. I am also enclosing the annual report with the additional requested information.

Please file the annual report. If you have any questions, please do not hesitate to call me.

Sincerely,



Andrew L. Reiff

ALR/kr
Enclosures