

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M43700

FILED
Jan 04, 2011
Secretary of State

Entity Name: GABLES TRAILER PARK, INC.

Current Principal Place of Business:

825-935-955 S.W. 44TH AVENUE
MIAMI, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

BURLEIGH KAPLAN
5838 COLONY COURT
BOCA RATON, FL 334335202 US

New Mailing Address:

FEI Number: 59-2749644 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KAPLAN, BURLEIGH
5838 COLONY COURT
BOCA RATON, FL 334335202 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

OFFICERS AND DIRECTORS:

Title: PSTD
Name: KAPLAN, BURLEIGH
Address: 5838 COLONY COURT
City-St-Zip: BOCA RATON, FL 334335202

Title: D
Name: KAPLAN, LILY
Address: 5838 COLONY COURT
City-St-Zip: BOCA RATON, FL 334335202

Title: D
Name: HOWARD, CYNTHIA
Address: 3062 NW 61ST ST.
City-St-Zip: BOCA RATON, FL 33196 US

Title: D
Name: KAPLAN, CHERYL
Address: 555NE 34TH ST., APT. #1101
City-St-Zip: MIAMI, FL 33137

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: BURLEIGH KAPLAN

PSTD

01/04/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date