

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01989

FILED
Mar 18, 2009
Secretary of State

Entity Name: OAKSIDE MOBILE HOME PARK, INC.

Current Principal Place of Business:

6121 PLEASANT ST
ZEPHYRHILLS, FL 33542 US

New Principal Place of Business:

Current Mailing Address:

6121 PLEASANT ST
ZEPHYRHILLS, FL 33542 US

New Mailing Address:

FEI Number: 59-2059483

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, RICHARD L
6121 PLEASANT ST
ZEPHYRHILLS, FL 33542 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: D () Delete
Name: COLEMAN, LAWTON
Address: 6105 CHERRY ST
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: VD () Delete
Name: JACKSON, VIRGINIA
Address: 6139 PEARL ST
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: SD () Delete
Name: WARNERS, JANE
Address: 6152 LINNET STREET
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: D () Delete
Name: SOYKE, DENISE
Address: 6100 CHERRY ST
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: D () Delete
Name: JOHNSON, RICHARD L
Address: 6121 PLEASANT ST
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: PD () Delete
Name: BERENS, GARY
Address: 6125 PEARL ST
City-St-Zip: ZEPHYRHILLS, FL 33542

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: COLEMAN, LAWTON
Address: 6105 CHERRY ST
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: T (X) Change () Addition
Name: MOORE, ARNIE
Address: 6143 PLEASANT ST.
City-St-Zip: ZEPHYRHILLS, FL 33542

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

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

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD L. JOHNSON

D

03/18/2009

Electronic Signature of Signing Officer or Director

Date