2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 04, 2008 8:00 am DOCUMENT # N02000003150 **Secretary of State** 02-04-2008 90034 029 ****70.00 COCOA PALMS MOBILE HOME PARK HOMEOWNERS ASSOCIATION INC. Principal Place of Business Mailing Address 126 SABAL AVE 126 SABAL AVE CAPE CANAVERAL FL 32920 CAPE CANAVERAL FL 32920 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 45-0473316 Not Applicable Zip Country Zip Country \$8.75 Additional Ø 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TOWLE, DONALD H JR ... Street Address (P.O. Box Number is Not Acceptable) 126 SABAL AVE CAPE CANAVERAL FL 32920 City Zip Code 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 familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or primon name of registered agent and the Eacobcabio. 4NOTE: Ron stored Agent signature required when reinstating DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2008 Trust Fund Contribution Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Delete TITLE ☐ Change Addition TOWLE, DONALD H JR NAME NAME 126 SABAL AVE STREET ADDRESS STREET ADDRESS CAPE CANAVERAL FL 32920 CITY - ST - ZIP CITY-ST-ZIP TITLE Datate 🔲 TITLE ☐ Change ☐ Addition ETENSE, MARGE HARVE NAME 115 COCOA PALMS AVE STREET ADDRESS STREET ADDRESS CAPE CANAVERAL FL 32920 CITY-ST-ZIP DITY-ST-ZIP TITLE A Oslete TITLE Change Addition MILLICENT RIHA 123 COCOA PALMS AVE. NAME GIANNONE, LORRAINE MAME STREET ADDRESS 207 SAGO CIR. STREET ADDRESS CAPE CANAVERAL FL 32920 CITY-ST-ZIP CITY-ST-ZIP CAPE CANAVERAL FL. 32920 TD TITLE ☐ Delete TIBLE Change CitibbA 🔲 KNAPP, EDITH NAME STREET ADDRESS 138 SABAL AVE STREET ADDRESS CAPE CANAVERAL FL 32920 CITY-ST-ZIP CITY-ST-ZIP BILLE ☐ Dalete TITLE ☐ Change ☐ Addition NAME STREET ACCPESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete THILE ☐ Change Addition NAME NAME

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12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that it 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CHY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: Sould The Laula R. DOWALD H. TOWLE JE. 1/27/08 321-917-7645