## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name N03802

(8)

DUNEDIN MOBILE MANOR ASSOCIATION, INC.

701120										
Principal Place	of Business	Mailing Address	ing Address			DO 11101 10111 0 0110 1	III - EIEI - EIEI - E		En 21211 1221	
	BILE MANOR ASSOC INC. AVENUEX18X 34698-8123 No. 19	130 PATRICIA AVE. 光號 16 DUNEDIN FL 34698					1.2			
US Offices		US			3. Date Incorporate 06/21/198	3. Date Incorporated or Qualified 06/21/1984		3a. Date of Last Report 04/20/1995		
2. Principal Pla	ce of Business	2a. Mailing Address			4. FEI Number		l	Ar	plied For	
21		26			59-01556	22			t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Stal	us Desired	ed S8.75 Additional Fee Required			
City & State		City & State			6. Election Campaig Trust Fund Contr				May Be to Fees	
<b>Z</b> ID	Country	<b>28</b>	Count	try	8. This corporation		tanoible tax u			
24	25	29	30		Florida Statutes		) Yes □ N	0		
	9. Name and Address of Current	Registered Agent			10. Name and Add	ress of New Re	gistered Ag	ent		
			8	Name	Mary Lou Wil	liams				
	A, HELEN	aress (P.O. Box Number is Not Acceptable)								
130 PATRICIA AVENUE (DELETE) 83					30 Patricia Avenue #16					
#36	•	and the f	1	99						
DUNEDI	N FL 34698		1	34 City	- 4		FL		Code	
44 0	o the provisions of Sections 617.0502 a	and 617 1509. Elavida Statuta	e the above	alinamed cor	unedin	nent for the pure	ose of chang	ning its re	1698-81 pistered office	
or registers	ed agent, or both, in the State of Florida	a. Such change was authorize	ea by the ca	orporation's b	poard of directors. I hereby	accept the appoi	in ment as re	gistered a	igent. I am	
familiar wit SIGNATURE	th, and accept the obligations of, Section $MAKY - CU - U$	n 617.0503, Florida Statutes.	TE: Flégistopo A	my ke	un Velleaure	. 1	DATE 5	1991	6	
12.	Signafure, typed or printed name of registered agent a OFFICERS AND		13.	gerii prejoature re	ADDITIONS/CH/	NGES TO OFFI		DIRECTOR	RS IN 12	
TITLE	D OFFICERS AND	DELETE	1.1 1011	₹	Frances Ans			Change	RS IN 12  Addition	
NAME	KICZIK, JEAN	45-	1.2 NAM	NE	130 Patricia					
STREET ADDRESS	130 PATRICIA AVE., SUITE 69		1.3 STR	EET ADDRESS	Dunedin, Fla					
CITY-ST-ZIP	DUNEDIN FL 34698		1.4 CIT	Y-St-ZIP						
TITLÉ	VP	DELETE	2.1 TITI	LE	Doris Marti	n VD	Æ	Change	Addition	
NAME	CORNELL, ETTA		2 2 NA+	νħē	130 Patrici					
STREET ADDRESS	130 PATRICIA AVE #20		2 3 STR	REFT ADDRESS	Dunedin, FL					
CITY-ST-ZIP	DUNEDIN FL 34698	——————————————————————————————————————		TY-ST-ZIP	Daneamili			Chapas	Addition	
TITLE	\$ (S	ame) DELETE	3.1 TIT	i	Helen Kasha	ta Dir.	*	Change	□] vaquition	
NAME	WILSON, LOUISE		3.2 NAf		130 Patrici	a Ave #	:69			
STREET ADDRESS	130 PATRICIA AVE #52			REET ADDRESS	Dunedin, FL	34698				
CITY-ST-ZIP	DUNEDIN FL 34698	DELETE	3.4. CI	TY-ST-ZIP			<u></u>	Change	☐ Addition	
TITLE NAME	CARIDEO, SABINA	AME) LIBELETE	4 2 NA					. •	_	
STREET ADDRESS	130 PATRICIA AVENUE. #96			REET ADDRESS						
CITY - ST - ZIP	DUNEDIN FL 34698			Y-ST-ZIP						
TITLE	<u> </u>	DELETE	5.1 TIT					] Change	Addition	
NAME	OERTLE, TOMMI	AME)	5 2 NA	ME						
STREET ADDRESS	130 PATRICIA AVE. #30		5.3 ST	REET ADDRESS						
CITY-ST-ZIP	DUNEDIN FL 34698		5.4 D(I	Y-ST-ZIP					_ =====================================	
TITLE	D	<b>K</b> ] DELETE	61 JII					<b>C</b> hange	☐ Addition	
NAME	GREY, NETTIE		6 2 NA	ME						
STREET ADDRESS	130 PATRICIA AVE. #6		6.3 \$1	REET ADDRESS						
CHTV. ST-7IP	DUNEDIN FL 34698		6.4 CIT	TY-ST-ZIP						
14. I do heret	by certify that the information supplied v	vith this filing is voluntarily furr	nished and o	does not qua	lify for the exemption stated	I in Section 119.	07(3)(k), Flori	da Statute	es. I further made under	

certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.