

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04359

FILED  
May 10, 2010  
Secretary of State

**Entity Name:** CAREFREE COVE MOBILE HOME OWNERS, INC.

**Current Principal Place of Business:**

3224 NW 34TH ST  
LAUDERDALE LAKES, FL 33309 US

**New Principal Place of Business:**

**Current Mailing Address:**

3224 NW 34TH ST  
LAUDERDALE LAKES, FL 33309 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

TABOR, SUSAN  
3224 NW 34TH ST  
LAUDERDALE LAKES, FL 33309 US

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: P  
Name: AURICH, ANIBAL  
Address: 3450 NW 32ND AVE  
City-St-Zip: LAUDERDALE LAKES, FL 33309 US

Title: VP  
Name: SABANDO, MYRA  
Address: 3232 NW 34TH ST  
City-St-Zip: LAUDERDALE LAKES, FL 33309 US

Title: T  
Name: BENOIT, JOSEPH  
Address: 3225 NW 37 ST  
City-St-Zip: LAUDERDALE LAKES, FL 33309 US

Title: S  
Name: TABOR, SUSAN  
Address: 3224 NW 34TH ST  
City-St-Zip: LAUDERDALE LAKES, FL 33309 US

Title: D  
Name: DIAZ, ANABEL  
Address: 3450 NW 32ND AVE  
City-St-Zip: LAUDERDALE LAKES, FL 33309 US

Title: D  
Name: MARTIN, BOB  
Address: 3240 NW 36TH CT  
City-St-Zip: LAUDERDALE LAKES, FL 33309

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

SIGNATURE: ANIBAL AURICH

P

05/10/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date