

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 11, 2003 8:00 am
Secretary of State

07-11-2003 90056 040 ****61.25

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DOCUMENT # N04359

1. Entity Name

CAREFREE COVE MOBILE HOME OWNERS, INC.



Principal Place of Business

3273 NW 37TH ST.
LAUDERDALE LKS FL 33309
US

Mailing Address

3273 NW 37TH ST.
LAUDERDALE LKS FL 33309
US

2. Principal Place of Business

3. Mailing Address

3420 NW 32nd AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

LAUDERDALE LAKES FL

Zip

Country

Zip
33309

Country
US

4. FEI Number NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DUENARME, YVETTE
3233 NW 34 CT
FT LAUDERDALE FL 33309

7. Name and Address of New Registered Agent

Name LARRY SANDS

Street Address (P.O. Box Number is Not Acceptable)

3420 NW 32nd AVE

City LAUDERDALE LAKES, FL

Zip Code
33309

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 LARRY SANDS

Signature, typed or printed name of registered agent and title if applicable.

Larry Sands

(NOTE: Registered Agent signature required when reinstating)

07/08/03

DATE

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE P
NAME DUENARME, YVETTE
STREET ADDRESS 3233 N.W 34TH CT
CITY-ST-ZIP LAUDERDALE LAKES FL 33309 ☒ Delete

TITLE VP
NAME SCHUMACHER, STEVE
STREET ADDRESS 3409 NW 37TH WAY
CITY-ST-ZIP LAUDERDALE LAKES FL 33309 ☒ Delete

TITLE S
NAME LUCAS, BARBARA
STREET ADDRESS 3216 NW 35TH CT
CITY-ST-ZIP LAUDERDALE LAKES FL 33309 ☐ Delete

TITLE T
NAME FULKERSON, ALAN
STREET ADDRESS 3601 N.W 32ND AVE
CITY-ST-ZIP LAUDERDALE LAKES FL 33309 ☒ Delete

TITLE D
NAME OWEN, JOHN
STREET ADDRESS 3241 N.W 34TH CT
CITY-ST-ZIP FORT LAUDERDALE FL 33309 ☒ Delete

TITLE D
NAME PARSONS, KAY
STREET ADDRESS 3240 NW 34TH ST
CITY-ST-ZIP LAUDERDALE LAKES FL 33309 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME SANDS, LARRY
STREET ADDRESS 3420 NW 32ND AVE
CITY-ST-ZIP LAUDERDALE LAKES, FL 33309 ☒ Change ☐ Addition

TITLE VP
NAME TRAINO, GERRY
STREET ADDRESS 3216 NW 34th CT
CITY-ST-ZIP LAUDERDALE LAKES, FL 33309 ☒ Change ☐ Addition

TITLE S
NAME LUCAS, BARBARA
STREET ADDRESS 3216 NW 35th CT
CITY-ST-ZIP LAUDERDALE LAKES, FL 33309 ☐ Change ☐ Addition

TITLE T
NAME BENOIT, JOE
STREET ADDRESS 3225 NW 37th ST
CITY-ST-ZIP LAUDERDALE LAKES ☒ Change ☐ Addition

TITLE D
NAME FORTIN, JACKIE
STREET ADDRESS 3631 NW 32nd WAY
CITY-ST-ZIP LAUDERDALE LAKES, FL 33309 ☒ Change ☐ Addition

TITLE D
NAME PARSONS, KAY
STREET ADDRESS 3240 NW 34th ST
CITY-ST-ZIP LAUDERDALE LAKES, FL 33309 ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *LARRY SANDS*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Larry Sands 954 4841800

Date Daytime Phone #

CR2E037 (4/03)