2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07593

FILED Mar 08, 2011 Secretary of State

Entity Name: SHADY REST MOBILE HOME OWNERS, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

5240 MASSACHUSETTS STREET ZEPHYRHILLS, FL 33542 US

Current Mailing Address: New Mailing Address:

5240 MASSACHUSETTS STREET ZEPHYRHILLS, FL 33542 US

FEI Number: 59-2675524 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SHARTLE, EVELYN 5240 MASSACHUSETTS STREET ZEPHYRHILLS, FL 33542 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: F

Name: CURRIER, JACQUELINE Address: 37838 LAGOON COURT City-St-Zip: ZEPHYRHILLS, FL 33542

Title: VP

 Name:
 JENSEN, ANDREW T

 Address:
 37834 LAGOON COURT

 City-St-Zip:
 ZEPHYRHILLS, FL 33542

Title: S

 Name:
 FRANCE, RAYALDA

 Address:
 5237 VINEYARD ST

 City-St-Zip:
 ZEPHYRHILLS, FL 33542

Title:

 Name:
 JENSEN, CAROL

 Address:
 37834 LAGOON COURT

 City-St-Zip:
 ZEPHYRHILLS, FL 33542

Title:

Name: BENNIS, THOMAS
Address: 5253 VINEYARD STREET
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: D

Name: SHARTLE, EVELYN

Address: 5240 MASSACHUSETTS STREET City-St-Zip: ZEPHYRHILLS, FL 33542

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: EVELYN SHARTLE T 03/08/2011