

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07678

FILED
Feb 16, 2012
Secretary of State

Entity Name: MOBILE HOME OWNERS ASSOCIATION OF SANDHILLS SHORES INC.

Current Principal Place of Business:

3200 U.S. #1
FT. PIERCE, FL 34982

New Principal Place of Business:

Current Mailing Address:

284 KINGFISHER AVE.
FORT PIERCE, FL 34982 US

New Mailing Address:

136 SANDHILL BLVD.
FT. PIERCE, FL 34982 US

FEI Number: 59-2507767

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HODUR, BETTY ANNE
284 KINGFISHER AVE.
FORT PIERCE, FL 34982 US

Name and Address of New Registered Agent:

TIBBS, CAROL A
136 SANDHILL BLVD.
FT. PIERCE, FL 34982 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: CAROL TIBBS

02/16/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: HARRIS, BRUCE
Address: 203 FLAMINGO AVE.
City-St-Zip: FORT PIERCE, FL 34982

Title: V
Name: HODUR, BETTY
Address: 284 KINGFISHER AVE.
City-St-Zip: FORT PIERCE, FL 34982

Title: S
Name: TIBBS, CAROL
Address: 136 SANDHILL BLVD.
City-St-Zip: FORT PIERCE, FL 34982

Title: T
Name: SCHRAMM, PATTI
Address: 327 MOCKINGBIRD AVE.
City-St-Zip: FORT PIERCE, FL 34982

Title: D
Name: DEVENDORF, MICHELLE
Address: 323 MOCKING BIRD AVE
City-St-Zip: FORT PIERCE, FL 34982

Title: D
Name: DAVIS, RAY
Address: 56 MANOR DR.
City-St-Zip: FORT PIERCE, FL 34982

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: CAROL TIBBS

S

02/16/2012

Electronic Signature of Signing Officer or Director

Date