

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07873

FILED
Jan 16, 2009
Secretary of State

Entity Name: MINERVA PARK MOBILE HOME OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2800 HIGHWAY 17-92 W
HAINES CITY, FL 33844 US

New Principal Place of Business:

Current Mailing Address:

2800 HWY 17-92
#45
HAINES CITY, FL 33844 US

New Mailing Address:

FEI Number: 59-2516660 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

COLLING, LEE JAY
529 VERSAILLES DRIVE
SUITE 103
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

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: PD () Delete
Name: RYAN SR, MARVIN
Address: 2800 U.S. HWY 17-92 W LOT 22
City-St-Zip: HAINES CITY, FL 33844

Title: VD () Delete
Name: KNITTLE, CAREY
Address: 2800 U.S. HWY 17-92 W LOT 78
City-St-Zip: HAINES CITY, FL 33844

Title: SD () Delete
Name: SAPORITA, MARJORIE
Address: 2800 US HWY 17-42W, LOT LOT 60
City-St-Zip: HAINES CITY, FL 33844

Title: TD () Delete
Name: ELSIE CRAWFORD,
Address: 2800 HWY 17-92 W., #45
City-St-Zip: HAINES CITY, FL

Title: D () Delete
Name: CHAPMAN, PHILLIP
Address: 2800 U.S. HWY 17-92 W LOT 51
City-St-Zip: HAINES CITY, FL 33844

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARJORIE SAPORITA

SEC.

01/16/2009

Electronic Signature of Signing Officer or Director

Date