


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 22, 2004 8:00 am
Secretary of State

03-22-2004 90093 023 ****70.00

DOCUMENT # N08222	
1. Entity Name COLONIAL MOBILE MANOR HOME OWNERS ASSOCIATION, INC.	

Principal Place of Business 900 9TH AVE EAST LOT #107 PALMETTO FL 34221 US	Mailing Address 900 9TH AVE EAST LOT #107 PALMETTO FL 34221 US
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2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E037 (11/03)

4. FEI Number 59-2493045		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent PLUDE, DONALD 900 9TH AVE EAST LOT #107 PALMETTO FL 34221		7. Name and Address of New Registered Agent Name ROBERT SAVAGE Street Address (P.O. Box Number is Not Acceptable) 900 9TH AVE E # 173 City PALMETTO FL Zip Code 34221	
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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 *Elaine Carpenter, Treasurer* DATE 3/15/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PLUDE, DONALD 900 9TH AVE. E., LOT 107 PALMETTO FL 34221 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	LEN JARVIS, DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 900 9TH AVE, # 211 PALMETTO, FL. 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NISBETT, EARL 900 9TH AVE. E., LOT 10 PALMETTO FL 34221 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ELLEN ROBINSON, DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 900 9TH AVE. # 174 PALMETTO, FL. 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CARPENTER, ELAINE 900 9TH AVE. E., LOT 103 PALMETTO FL 34221 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ROBERT SAVAGE, PRES <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 900 9TH AVE E. # 173 PALMETTO, FL. 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KROLL, JIM 900 9TH AVE. E., LOT 136 PALMETTO FL 34221 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S METCALF, ELSIE 900 9TH AVE. E., LOT 231 PALMETTO FL 34221 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VANDER HEIDE, BILL 900 9TH AVE. E., LOT 174 PALMETTO FL 34221 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Elaine Carpenter* ELAINE CARPENTER 3/15/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #