

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N08474 (1)

1. Corporation Name

PAN AMERICAN MOBILE HOME OWNERS ASSOCIATION INC.



Principal Place of Business

Mailing Address

C/O BERGER, OSCAR/PAN AMERICAN MHO ASSOC.
129 NORTHWEST 69TH STREET
FORT LAUDERDALE FL 33309
US

C/O BERGER, OSCAR/PAN AMERICAN MHO ASSOC.
129 NORTHWEST 69TH STREET
FORT LAUDERDALE FL 33309
US

3. Date Incorporated or Qualified
04/01/1985

3a. Date of Last Report
04/05/1995

2. Principal Place of Business
21. PAN AMERICAN M.H.O. Assoc.

2a. Mailing Address

4. FEI Number
59-2525967

Applied For
Not Applicable

22. 111 NW 68 ST.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

23. FT. LAUDERDALE, FL.

City & State

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24. 33309

Country

25. BROWARD

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BERGER, OSCAR
129 NORTHWEST 69TH STREET
FORT LAUDERDALE FL 33309

81. Name VINCENT MERO
82. Street Address (P.O. Box Number is Not Acceptable)
111 NW 68 ST.
83.
84. City FT. LAUDERDALE FL 85. Zip Code 33309

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Vincent Mero

(NOTE: Registered Agent signature required when reinstating)

DATE 2/22/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PD	BERGER, OSCAR	129 NORTHWEST 69TH STREET	FORT LAUDERDALE FL	<input checked="" type="checkbox"/>
VD	RICE, (JOHN) FREDERI	87 NORTHWEST 69TH STREET	FORT LAUDERDALE FL	<input type="checkbox"/>
SD	MERO, VINCENT	111 N.W. 68TH ST	FT. LAUDERDALE FL	<input type="checkbox"/>
TD	MORET, FRANCES	161 N.W. 69TH ST	FT. LAUDERDALE FL	<input checked="" type="checkbox"/>
D	MICHAU EDWARD	130 N.W. 69TH STREET	FT. LAUDERDALE FL	<input type="checkbox"/>
D	JOHNSON, RICHARD	6611 NORTHWEST 2ND AVENUE	FT. LAUDERDALE FL	<input checked="" type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE 2/22/96 (954) 776-0021

CR2E037 (12/95)