

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 04 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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 VINCENT MERO. PAN AMERICAN MHO ASSOC.
111 NW 68TH ST
FORT LAUDERDALE FL 33309
US

C/O VINCENT MERO. PAN AMERICAN MHO ASSOC.
111 NW 68TH ST
FORT LAUDERDALE FL 33309-2107
US

3. Date Incorporated or Qualified
04/01/1985

3a. Date of Last Report
02/27/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number
59-2525967

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

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

MERO, VINCENT
111 NW 68TH ST
FORT LAUDERDALE FL 33309

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD
NAME RICE, (JOHN) FREDERI
STREET ADDRESS 87 NORTHWEST 69TH STREET
CITY-ST-ZIP FORT LAUDERDALE FL

1.1 TITLE PRESIDENT
1.2 NAME VINCENT MERO
1.3 STREET ADDRESS 111 NW 68ST
1.4 CITY-ST-ZIP FT. LAUDERDALE, FL.

TITLE SD
NAME MERO, VINCENT
STREET ADDRESS 111 N.W. 68TH ST
CITY-ST-ZIP FT. LAUDERDALE FL

2.1 TITLE V. PRESIDENT
2.2 NAME PETER BOGATTI
2.3 STREET ADDRESS 131 NW 68ST.
2.4 CITY-ST-ZIP FT. LAUDERDALE, FL.

TITLE D
NAME MICHAU EDWARD
STREET ADDRESS 130 N.W. 69TH STREET
CITY-ST-ZIP FT. LAUDERDALE FL

3.1 TITLE DIRECTOR
3.2 NAME EDWARD MICHAU
3.3 STREET ADDRESS 130 NW 69ST.
3.4 CITY-ST-ZIP FORT LAUDERDALE, FL.

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE DIRECTOR
4.2 NAME FREDERICK (JOHN) RICE
4.3 STREET ADDRESS 87 NW 69ST.
4.4 CITY-ST-ZIP FT. LAUDERDALE, FL.

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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

1-10-97

Date

954-776-0021

Daytime Phone # 0035843

CR2E037 (9/96)