

DOCUMENT # N08890

1. Entity Name

GREYSTONE PARK MOBILE HOMEOWNERS, INC.

FILED
May 03, 2000 8:00 am
Secretary of State

03-08-2000 90042 023 ****61.25

Principal Place of Business		Mailing Address	
13300 E. TAMiami TRAIL LOT 65 NAPLES FL 34114 US		13300 E. TAMiami TRAIL LOT 65 NAPLES FL 34114-8710 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

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

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
ERWIN, CLIFF 13300 E TAMiami TRAIL LOT 65 NAPLES FL 33961		Name <u>ERWIN, SHIRLEY</u> Street Address (P.O. Box Number is Not Acceptable) <u>13300 E. TAMiami TR.</u> <u>#65</u> City <u>NAPLES</u> FL <u>34114</u>	

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.

SIGNATURE Shirley Erwin, SECRETARY Shirley Erwin 2-28-2000
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW:
 FEE IS \$61.25

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

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PERRY, GEORGE 13300 E TAMiami TR, LOT 30 NAPLES FL 34114	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D DICK FREIWAHD 13300 E. TAMiami TR., #48 NAPLES, Florida 34114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ERWIN, CLIFF 13300 E TAMiami TR. #65 NAPLES FL 33961	<input checked="" type="checkbox"/> Delete	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D ROJANE G. HESPIE 13300 E. TAMiami TR. #11 NAPLES, Florida 34114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CHARTRAND, PATRICIA 13300 E TAMiami TRAIL, LOT 63 NAPLES FL	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ERWIN, SHIRLEY 13300 E TAMiami TRAIL LOT 65 NAPLES FL	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O TUMBLESON, STARLING 13300 E. TAMiami TR. #33 NAPLES FL	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition V.P. TUMBLESON, STARLING 13300 E. TAMiami TR. #33 NAPLES, FL 34114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BECK, WILLIAM 13300 E TAMiami TRAIL LOT 50 NAPLES FL	<input type="checkbox"/> Delete	<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:

CHARTRAND, PATRICIA TREASURER
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 04/28/2000 CHARTRAND

Date

Daytime Phone #

941-793-3523

CR2037 (9/99)