## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 16, 2004 8:00 am Secretary of State

DOCUMENT # N08921  1. Entity Name LAKELAND ESTATES MOBILE HOME OWNERS ASSOCIATION, INC.						O3-16-2004 90020 011 ****61.25					
Principal Place 316 KATHY A LAKELAND, F	WE		Address ATHY AVE AND, FL 33801	US							
2 Principal P	lace of Business	3 Mailin	g Address								
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Suite, Apt. #, etc.		Suite	Suite, Apt. #, etc.			01052004	Chg-NP	CR2E03	37 (10/03)		
City & State		City	City & State		4. FEI Number 59-2957258				oplied For ot Applicable		
Žip	Country	Zip		Country		5. Certificate	of Status Desire		\$8.75 Add		
	6. Name and Address of Current	Registered	Agent			7. Name and	Address of Ne		<del> </del>		
BLACK CI	ARENCE E	-		Name						-	
BLACK, CLARENCE E 316 KATHY AVE. LAKELAND, FL 33801				Street A	Street Address (P.O. Box Number is Not Acceptable)						
				City					Zip Cod	le	
<del></del> -	named entity submits this statement for							FL	<u>·                                    </u>		
SIGNATURE .	ions of registered agent.										
	Signature, typed or printed name of registered agent	t and title if applic	able. (NOTE: R	egistered Agent signeti	ure required	when renstating)	,	DATE	,		
	Signeture, speed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2004	t and title if applic	9. Election Campa Trust Fund Con	aign Financing	THE COUNTED	\$5.00 May 8 Added to Fees	le		k payable t		
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2. 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 eath; that if 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:	SIGNATURE AND TYPED O	Durling PHONTED NAME OF SIGNATOR	Judith PRICER OR DIRECTOR	A. DARling	3-11-04 Date	8632840873 Deytime Phone #
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