

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000933

FILED
Mar 13, 2011
Secretary of State

Entity Name: PALM BEACH MOBILE HOME PARK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

402 DATE PALM DRIVE
LAKE WORTH, FL 33461

New Principal Place of Business:

Current Mailing Address:

402 DATE PALM DRIVE
LAKE WORTH, FL 33461

New Mailing Address:

FEI Number: 59-2652231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LOW, MALINDA R SEC.
402 DATE PALM DRIVE
LAKE WORTH, FL 33461 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: VACHON, JEAN GUY
Address: 417 ALMOND DRIVE
City-St-Zip: LAKE WORTH, FL 33461

Title: VP
Name: GRENIER, MARC ANDRE'
Address: 711 ALMOND DRIVE
City-St-Zip: LAKE WORTH, FL 33461

Title: VP
Name: GREENE, JERRI
Address: 2101 8TH AVENUE NORTH
City-St-Zip: LAKE WORTH, FL 33461

Title: D
Name: CRAVEN, MARK
Address: 2014 7TH COURT NORTH
City-St-Zip: LAKE WORTH, FL 33461

Title: D
Name: HOMMEL, DAVID
Address: 712 BANYAN DRIVE
City-St-Zip: LAKE WORTH, FL 33461

Title: T
Name: ROY, NICOLE
Address: 404 ALMOND DRIVE
City-St-Zip: LAKE WORTH, FL 33461

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MALINDA R. LOW

S

03/13/2011

Electronic Signature of Signing Officer or Director

Date