

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09031

FILED
Jan 19, 2009
Secretary of State

Entity Name: MOBILE HOME OWNERS OF SUNRISE 31 SOUTH, INCORPORATED

Current Principal Place of Business:

SUNRISE MOBILE HOME PARK
2371 SE HWY 31
ARCADIA, FL 34266 US

New Principal Place of Business:

Current Mailing Address:

SUNRISE MOBILE HOME PARK
2371 SE HWY 31
ARCADIA, FL 34266 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEAVER, PAUL A
2371 SE HY 31 LOT 72
ARCADIA, FL 34266 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 () Delete
Name: KESON, SHIRLEY
Address: 2371 SE HWY 31 LOT 30
City-St-Zip: ARCADIA, FL 34266

Title: TD () Delete
Name: WEAVER, PAUL A
Address: 2371 SE HWY 31 LOT 72
City-St-Zip: ARCADIA, FL 34266

Title: SD () Delete
Name: APPLGATE, ANN
Address: 2371 SE HWY. 31 LOT 76
City-St-Zip: ARCADIA, FL 34266

Title: VP () Delete
Name: WALLACE, JOHN
Address: 2371 SE HWY 31 LOT 17
City-St-Zip: ARCADIA, FL 34266

Title: D () Delete
Name: TASKER, SR., LOUIS
Address: 2371 SE HWY 31 LOT 56
City-St-Zip: ARCADIA, FL 34266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STANFORD, LARRY
Address: 2371 SE HWY 31 LOT 85
City-St-Zip: ARCADIA, FL 34266

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: CRAMPTON, JOHN
Address: 2371 SE HWY 31 LOT 54
City-St-Zip: ARCADIA, FL 34266

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ANN APPLGATE

SD

01/19/2009

Electronic Signature of Signing Officer or Director

Date