

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 19, 2004 8:00 am**  
**Secretary of State**

02-19-2004 90031 032 \*\*\*\*61.25

**DOCUMENT # N12592**

1. Entity Name

TAVARES HOLIDAY MOBILE PARK HOMEOWNERS, INC.



Principal Place of Business

17A DOUGLAS  
TAVARES FL 32778  
US

Mailing Address

17B DOUGLAS  
TAVARES FL 32778  
US

2. Principal Place of Business

17B Douglas  
Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Tavares FL

City & State

FL

Zip

32778

Country

US

Zip

32778

Country

US

6. Name and Address of Current Registered Agent

HENDERSON, ANN  
17 B DOUGLAS  
TAVARES FL 32778

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Ann Henderson

Ann Henderson

2/14/04

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**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution.

☐ \$5.00 May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE VD  
NAME PETERSON, JEAN  
STREET ADDRESS 22-C DOUGLAS DR.  
CITY-ST-ZIP TAVARES FL 32778 ☐ Delete

TITLE T  
NAME HENDERSON, ANN  
STREET ADDRESS 17B DOUGLAS  
CITY-ST-ZIP TAVARES FL 32778 ☐ Delete

TITLE PD  
NAME PULLEN, DON  
STREET ADDRESS 35- C DALE DRIVE  
CITY-ST-ZIP TAVARES FL 32778 ☐ Delete

TITLE SD  
NAME GIBSON, MILDRED  
STREET ADDRESS 22-D DOUGLAS DRIVE  
CITY-ST-ZIP TAVARES FL 32778 ☐ Delete

TITLE VD  
NAME SMITH, JOE  
STREET ADDRESS 30-B JANICE AVENUE  
CITY-ST-ZIP TAVARES FL 32778 ☐ Delete

TITLE D  
NAME GOODWIN, AL  
STREET ADDRESS 33-D JANICE AVENUE  
CITY-ST-ZIP TAVARES FL 32778 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VP  
NAME Norman Cassavore  
STREET ADDRESS 27A Janice  
CITY-ST-ZIP Tavares, FL 32778 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE Pres.  
NAME Walt Conrad  
STREET ADDRESS 46A Dale Dr.  
CITY-ST-ZIP Tavares, FL 32778 ☒ Change ☐ Addition

TITLE Sec'y.  
NAME Peggy Feiereisen  
STREET ADDRESS 37 Dale Drive  
CITY-ST-ZIP Tavares FL 32778 ☐ Change ☐ Addition

TITLE 2nd V.P.  
NAME Frank Blazer  
STREET ADDRESS 20 A Douglas  
CITY-ST-ZIP Tavares, FL 32778 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ 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:

Ann Henderson

Ann Henderson

2/14/03

352-343-4838

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #