

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2001 8:00 am
Secretary of State

02-27-2001 90354 035 ****61.25

DOCUMENT # N12902

1. Entity Name

DIXIE MOBILE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O MARY VAN SLEEN
 19640 W DIXIE HWY #B-217
 MIAMI FL 33180
 US

C/O MARY VAN SLEEN
 19640 W DIXIE HWY. #B-217
 MIAMI FL 33180
 US

2. Principal Place of Business

3. Mailing Address

40 MARY VAN SLEEN
 Suite, Apt. #, etc. *#B-217*
19640 W. DIXIE Hwy

SAME
 Suite, Apt. #, etc.

City & State
MIAMI, FL

City & State

Zip Country
33180-2217 USA

Zip Country

4. FEI Number **59-2810534**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VAN SLEEN, MARY
 19640 W DIXIE HWY
 #B-217
 MIAMI FL 33180

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.

SIGNATURE *MARY VAN SLEEN*

Mary Van Sleen

2/20/01

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 ☐ Delete
 NAME PD
 STREET ADDRESS VAN SLEEN, MARY
 CITY-ST-ZIP 19640 W. DIXIE HWY, #B-217
 MIAMI FL

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

TITLE ☒ Delete
 NAME VPD
 STREET ADDRESS HURTUBISE, YVES
 CITY-ST-ZIP 19640 W. DIXIE HWY., #B-218
 MIAMI FL

TITLE ☒ Change ☐ Addition
 NAME *VPD*
 STREET ADDRESS *ANDRE MICHAUD*
 CITY-ST-ZIP *19640 W. DIXIE HWY, #B-204*
MIAMI, FL 33180

TITLE ☒ Delete
 NAME VP
 STREET ADDRESS THEORET, MARCEL
 CITY-ST-ZIP 19640 W. DIXIE HWY., #A-106
 MIAMI FL

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

TITLE ☒ Delete
 NAME S
 STREET ADDRESS TESSIER, ROGER
 CITY-ST-ZIP 19640 W DIXIE HWY A-104
 N. MIAMI BEACH FL

TITLE ☒ Change ☐ Addition
 NAME *S*
 STREET ADDRESS *RAYMONDE BOUCHARD*
 CITY-ST-ZIP *19640 W. DIXIE HWY, #B-209*
MIAMI, FL 33180

TITLE ☐ Delete
 NAME T
 STREET ADDRESS VAN SLEEN, MARY
 CITY-ST-ZIP 19640 W DIXIE HWY, B-217
 MIAMI FL 33180

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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: *MARY VAN SLEEN*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/01 (305) 682-0920

Date Daytime Phone #

CR2E037 (10/00)