

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005 8:00 am
Secretary of State

04-13-2005 90029 027 ****61.25

DOCUMENT # N26607 1. Entity Name CONRAD MOBILE HOME PARK ASSOC., INC.					
Principal Place of Business 9333 PARK BLVD. LOT 11C SEMINOLE, FL 33777 US			Mailing Address 9333 PARK BLVD. LOT 11C SEMINOLE, FL 33777 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		03202005 Chg-NP CR2E037 (10/03)	
City & State Zip Country		City & State Zip Country		4. FEI Number 59-2921094	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent CARTNER, ERNEST 9333 PARK BLVD LOT 20B SEMINOLE, FL 33777			7. Name and Address of New Registered Agent Name <u>Ernest Cartner</u> Street Address (P.O. Box Number is Not Acceptable) <u>9333 Park Blvd</u> City <u>Se</u> State <u>FL</u> Zip Code <u>33777</u>		
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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2005		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD REINHOLD, BYRON 9333 PARK BLVD LOT 12C SEMINOLE, FL 33777	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. George NICKS 9333 Park Blvd, Lot 6A Seminole, FL 33777	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARTNER, ERNEST 933 PARK BLVD, 18-B SEMINOLE, FL 33777	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	William Hall 9333 Park Blvd, Lot 14A Seminole, FL 33777	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROY, MATTHEWS 9333 PARK BLVD LOT 9C SEMINOLE, FL 33777	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Sara Hicks 9333 Park Blvd, Lot 6A Seminole, FL 33777	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RIDDLE, JOSEPH 9333 PARK BLVD LOT 11C SEMINOLE, FL 33777	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. Lyle Schatteeman 9333 Park Blvd Lot 16A Seminole, FL 33777	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BLANCHARD, EDITH 9333 PARK BLVD, SEMINOLE, FL 33777	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. Lyle Schatteeman 9333 Park Blvd Lot 16A Seminole, FL 33777	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OUELLETTE, EMIL 9333 PARK BLVD LOT 3D SEMINOLE, FL 33777	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. Lyle Schatteeman 9333 Park Blvd Lot 16A Seminole, FL 33777	☐ 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: <u>Sara M. Hicks</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			<u>4-7-05</u> <u>317-440-0340</u> Date Daytime Phone #		