

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30025

FILED  
Feb 18, 2010  
Secretary of State

**Entity Name:** SEBRING VILLAGE MOBILE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4343 SCHUMACHER ROAD  
SEBRING, FL 33872 US

**New Principal Place of Business:**

603 CASPER STREET  
SEBRING, FL 33872 US

**Current Mailing Address:**

4343 SCHUMACHER ROAD  
LOT 200-E  
SEBRING, FL 33872 US

**New Mailing Address:**

603 CASPER STREET  
SEBRING, FL 33872 US

FEI Number: 59-2924280

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COLLING, LEE JAY  
529 VERSAILLES DR, STE 103  
MAITLAND, FL 32751 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: V  
Name: REAGAN, BILL  
Address: 814 VILLAGE DRIVE  
City-St-Zip: SEBRING, FL 33872

Title: P  
Name: D'ALESSANDRIS, WALTER  
Address: 941 CIRRUS STREET  
City-St-Zip: SEBRING, FL 33872

Title: S  
Name: SINGER, JAN  
Address: 1043 DEWITT STREET  
City-St-Zip: SEBRING, FL 33872

Title: D  
Name: MCGINN, RUPERT  
Address: 932 CIRRUS STREET  
City-St-Zip: SEBRING, FL 33872

Title: T  
Name: MASCHUE, LESLIE  
Address: 1038 CONTOUR STREET  
City-St-Zip: SEBRING, FL 33872

Title: D  
Name: MOORE, WALTER  
Address: 1139 CAINE STREET  
City-St-Zip: SEBRING, FL 33872

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: WALTER D'ALESSANDRIS

P

02/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date