NONPROFIT **CORPORATION** ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

Arriva Europ

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## **FILED** Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90131 036 \*\*\*\*61.25

## **DOCUMENT # N31279**

1. Corporation Name

KOZY MOBILE HOME PARK ASSOCIATION, INC.

Principal Place of Business

Mailing Address

3113 CORTEZ RD W LOT 99 BRADENTON FL 34207

3113 CORTEZ RD W LOT 99 BRADENTON FL 34207



US		Uδ					A INDIVIDUAL MANAGEMENT OF THE PROPERTY OF THE			
_ ·	lace of Business	$\vdash$	Mailing Address				3. Date Incorporated or Qualifed			
21		26					03/21/1989		<del></del>	nation For
Suite, Apt.	#, etc.	L .	Suite, Apt. #, etc.				4. FEI Number		<del></del>	polied For
22		27					65-0109339			lot Applicable
City & Stat	<u> </u>	28	City & State			******	5 Certificate of Status Desired	<del>~</del> _		Additional lequired
Zip	Country		Zip r	Count	try		6. Election Campaign Financing		•	May Be
24	25	29		30			10. Name and Address of New Regist	ered		10 1 662
	9. Name and Address of Current	Regista	red Agent	<del></del>	B1	Name	to. Harris and Address of Hell Hogist		~ <u>~~</u>	
				- 1	•	Henric				
FREDRICE	K, LEROY			Ī	82 Street Address (P.O. Box Number is Not Acceptable)					
	RTEZ RD W LOT 99			L	_					
	ON FL 34207			1	83					
J. 3 W. C. 117				h	84	City			85 Zip	Code
						•		<u>FL</u>	.   `   `	
office or r agent. I a	to the provisions of Sections 617.0502 egistered agent, or both, in the State of im familiar with, and accept the obligation	f Florida	. Such change was at	unonzea i	ογι	the corporal	poration submits this statement for the purpo- tion's board of directors. I hereby accept the	appon	1000	egistered
SIGNATURE	Signature, typed or printed name of registered agent	and title of a	pplicable (NOTE	Registered A	geni	signature requi			1999	<del></del> -
12.	OFFICERS AND			13.			ADDITIONS/CHANGES TO OFFICER	RS AN		
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NAME	FREDRICK, LEROY			1 2 NAM	Æ	1				
STREET ADDRESS				13STR	EET	ADDRESS				
	BRADENTON FL 34207			14 CITY				_		
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ł · · · · · ·	BROCKBRADER, MARION			ı			Pat Milliser			
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NAME	BUTLER, JOHN			4 2 NAA		1	•			
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CITY-ST-ZIP	BRADENTON FL 34207			4 4 CITY	_	· ZIP			<u> </u>	Addis
TITLE	D		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	5 I TITLE		\ '	Tres D		☐ Change	Addition
NAME	MARKENS, JACK			52 NAV	_		Donna Snyder			
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NAME	1			6 2 NAA	Æ					
STREET ADDRESS				63STR	EET.	ADDRESS				
ſ	<u>'</u> [			64 CITY	/- ST	r. ZIP				
CITY-ST-ZIP	<u> </u>						Section 119.07(3)(i), Florida Statutes, I furth	24 626	of, that the	information

Indicated on this annual report or supplied with this failing does not qualify the basine 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

	rrearick	President
SUBMATURE AND TY		F SIGNING OFFICER OR DIRECTO
ZOMAL	Y / - Fr 1	0 6 1 1 1 1 1 1 1 1

11 March 1999