

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90070 008 ****61.25

DOCUMENT # N31279	
1. Entity Name KOZY MOBILE HOME PARK ASSOCIATION, INC.	



40062319



04032007 Chg-NP CR2E037 (12/06)

Principal Place of Business 3113 44TH AVE WEST BRADENTON, FL 34207 US	Mailing Address 3113 44TH AVE WEST BRADENTON, FL 34207 US
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2. Principal Place of Business - No P.O. Box # 3113 Cortez Rd W Suite, Apt. #, etc. #94	3. Mailing Address 3113 Cortez Rd W Suite, Apt. #, etc. #94
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City & State Bradenton, FL	City & State Bradenton, FL
Zip 34207	Country USA

4. FEI Number 65-0109339	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent GARATO, SUE 3113 44TH AVE W LOT # 94 BRADENTON, FL 34207	
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7. Name and Address of New Registered Agent Name: Suzi Garate Street Address (P.O. Box Number is Not Acceptable) 3113 Cortez Rd W # 94 City: Bradenton FL Zip Code: 34207	
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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: Suzi Garate, Suzi Garate, President DATE: 4/10/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WILSON, CHARLES 3113 44TH AVE W., LOT #93 BRADENTON, FL 34207 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEVENS, ROY 3113 44TH AVE. W., LOT 68 BRADENTON, FL 34207 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RUTKOWSKI, MIKE 3113 44TH AVE. W., LOT 76 BRADENTON, FL 34207 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GARATE, SUE 3113 44TH AVE. W., LOT 94 BRADENTON, FL 34207 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAL SMITH, WILLIAM 3113 44TH AVE. W., LOT 63 BRADENTON, FL 34207 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Günther, Lawrelle 3113 Cortez Rd W # 98 Bradenton, FL 34207 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Garate, Suzi 3113 Cortez Rd W # 94 Bradenton, FL 34207 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Bailey, Tonia 3113 Cortez Rd W # 93 Bradenton, FL 34207 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAL Miller, Ken 3113 Cortez Rd W # 95 Bradenton, FL 34207 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Suzi Garate Suzi Garate DATE: 4/10/07 941-727-2265
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #