

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2008 8:00 am
Secretary of State

02-13-2008 90028 021 ****61.25

DOCUMENT # N31279 1. Entity Name KOZY MOBILE HOME PARK ASSOCIATION, INC.					
Principal Place of Business 3113 CORTEZ ROAD WEST #94 BRADENTON, FL 34207 US			Mailing Address 3113 CORTEZ ROAD WEST #94 BRADENTON, FL 34207 US		
2. Principal Place of Business - No P.O. Box # 3113 Cortez Road west		3. Mailing Address 3113 Cortez Road west			
Suite, Apt. #, etc. #		Suite, Apt. #, etc. #			
City & State Bradenton, Florida		City & State Bradenton, Florida		4. FEI Number 65-0109339	
Zip 34207		Country Manatee		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GARATE, SUZI 3113 CORTEZ ROAD WEST LOT # 94 BRADENTON, FL 34207				7. Name and Address of New Registered Agent Name LAWRELLE H. GUNTHER Street Address (P.O. Box Number is Not Acceptable) 3113 Cortez Rd w # 98 City Bradenton FL Zip Code 34207	
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 LAWRELLE H. GUNTHER <i>Lawrelle H. Gunther</i> 2-9-08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		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	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GUNTHER, LAWRELLE 3113 CORTEZ ROAD WEST #98 BRADENTON, FL 34207	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Gunther Lawrelle 3113 Cortez Rd West #98 Bradenton FL 34207		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARATE, SUZI 3113 CORTEZ ROAD WEST #94 BRADENTON, FL 34207	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Garate, Suzi 3113 Cortez Rd West #94 Bradenton FL 34207		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input checked="" type="checkbox"/> Delete RUTKOWSKI, MIKE 3113 44TH AVE. W., LOT 76 BRADENTON, FL 34207	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Milliser, Pat 3113 Cortez Rd west #47 Bradenton FL 34207		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input checked="" type="checkbox"/> Delete BAILEY, TONIA 3113 CORTEZ ROAD WEST BRADENTON, FL 34207	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition HINKLE, BETTY 3113 Cortez Rd West #63 BRADENTON, FL 34207		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAL <input type="checkbox"/> Delete MILLER, KEN 3113 CORTEZ ROAD WEST #95 BRADENTON, FL 34207	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	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: <i>Lawrelle H. Gunther</i> 2-9-08 941-752-7550 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					