

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31779

FILED
Feb 25, 2010
Secretary of State

Entity Name: DROP ANCHOR MOBILE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

414 PAPAYA STREET
GOODLAND, FL 34140

New Principal Place of Business:

Current Mailing Address:

PO BOX 308
GOODLAND, FL 34140

New Mailing Address:

FEI Number: 65-0170480 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WM KORP ABLE/BAND
240 S. PINE APPLE AVE
SARASOTA, FL 34236 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: PD
Name: HIGUERA, MIKE
Address: PO BOX 838
City-St-Zip: GOODLAND, FL 34140

Title: S
Name: CHAMBERLAIN, HARMON LYLE
Address: PO BOX 53
City-St-Zip: GOODLAND, FL 34140

Title: AS
Name: CHAMBERLAIN, LINDA
Address: PO BOX 53
City-St-Zip: GOODLAND, FL 34140

Title: VP
Name: GRILL, DENNIS
Address: PO BOX 241
City-St-Zip: GOODLAND, FL 34140

Title: T
Name: METHNER, JOANN
Address: PO BOX 394
City-St-Zip: GOODLAND, FL 34140

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: HARMON LYLE CHAMBERLAIN

S

02/25/2010

Electronic Signature of Signing Officer or Director

Date