

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N32531

1. Entity Name

COUNTRY SQUIRE MOBILE HOME ASSOCIATION, INC.

FILED

Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90072 045 ****61.25

Principal Place of Business

Mailing Address

% DORIS E. LIVERSEGE
73 ROAD RUNNER RD
PAISLEY FL 32767

% DORIS E. LIVERSEGE
73 ROAD RUNNER RD
PAISLEY FL 32767

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2396292

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LIVERSEGE, DORIS E.
73 ROAD RUNNER RD.
PAISLEY FL 32767

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE V ☐ Delete
NAME KIDDER, WILLIAM
STREET ADDRESS 90 IVEY LANE
CITY-ST-ZIP PAISLEY FL 32767

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME LIVERSEGE, DORIS E.
STREET ADDRESS 73 RD RUNNER RD.
CITY-ST-ZIP PAISLEY FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME LIVERSEGE, C. THOMAS
STREET ADDRESS 73 ROAD RUNNER RD
CITY-ST-ZIP PAISLEY FL 32767

TITLE ☒ Change ☒ Addition
NAME RONALD WOOD
STREET ADDRESS 62 ROAD RUNNER RD
CITY-ST-ZIP PAISLEY, FL 32767

TITLE P ☐ Delete
NAME NEWHOUSE, RAMONA
STREET ADDRESS 49 IVEY LANE
CITY-ST-ZIP PAISLEY FL 32767

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME REICHERT, MARY
STREET ADDRESS 92 IVEY LANE
CITY-ST-ZIP PAISLEY FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME KIDDER, MARGARET
STREET ADDRESS 90 IVEY LANE
CITY-ST-ZIP PAISLEY FL 32767

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
DORIS E. LIVERSEGE

4-11-02

Date

(352) 669-1377

Daytime Phone #

CR2E037 (9/01)