

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 26, 1999 8:00 am
Secretary of State

02-26-1999 90018 047 ****61.25

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DOCUMENT # N37496

1. Corporation Name

SPRING HILL MOBILE HOME OWNER'S ASSOCIATION, INC

Principal Place of Business

185 IMPERIAL DR. N
MULBERRY FL 33860

Mailing Address

185 IMPERIAL DR. N
MULBERRY FL 33860



2. Principal Place of Business

21 92 WINDSOR LN.

Suite, Apt. #, etc.

22 MULBERRY, FL.

City & State

23 33860 POLK

Zip

Country

24

25

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

29

30

3. Date Incorporated or Qualified

04/02/1990

4. FEI Number

59-3020304

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

TAGGART, WILLIAM E
185 IMPERIAL DR. N
MULBERRY FL 33860

10. Name and Address of New Registered Agent

81 Name

MARTHA KEOUGH

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

83 92 WINDSOR LANE

84 City

MULBERRY

FL

85 Zip Code

33860

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Martha J. Keough - Martha J. Keough / TD 01-26-99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE
NAME HALVORSON, HARVEY
STREET ADDRESS 9 IMPERIAL DR. WEST
CITY-ST-ZIP MULBERRY FL 33860

TITLE V ☐ DELETE
NAME SCHNIEDER, ROBERT J
STREET ADDRESS 119 ACREA DR
CITY-ST-ZIP MULBERRY FL 33860

TITLE DT ☒ DELETE
NAME TAGGART, WILLIAM E
STREET ADDRESS 185 IMPERIAL DR.
CITY-ST-ZIP MULBERRY FL 33860

TITLE SD ☒ DELETE
NAME WILKINSON, RICHARD A
STREET ADDRESS 160 SABLE LANE
CITY-ST-ZIP MULBERRY FL 33860

TITLE D ☒ DELETE
NAME DOWNEY, FAYE
STREET ADDRESS 155 SABLE LANE
CITY-ST-ZIP MULBERRY FL 33860

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition
1.2 NAME DOWNEY, FAYE
1.3 STREET ADDRESS 155 SABLE LANE
1.4 CITY-ST-ZIP MULBERRY, FL. 33860

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE TD ☒ Change ☐ Addition
3.2 NAME KEOUGH, MARTHA
3.3 STREET ADDRESS 92 WINDSOR LANE
3.4 CITY-ST-ZIP MULBERRY, FL. 33860

4.1 TITLE D ☒ Change ☐ Addition
4.2 NAME WILKINSON, RICHARD A.
4.3 STREET ADDRESS 160 SABLE LANE
4.4 CITY-ST-ZIP MULBERRY, FL. 33860

5.1 TITLE SD ☐ Change ☒ Addition
5.2 NAME PILKINS, CINDY
5.3 STREET ADDRESS 144 SABLE LANE
5.4 CITY-ST-ZIP MULBERRY, FL. 33860

6.1 TITLE D ☐ Change ☒ Addition
6.2 NAME HALL, JERRY
6.3 STREET ADDRESS 181 IMPERIAL DRIVE
6.4 CITY-ST-ZIP MULBERRY, FL. 33860

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Martha J. Keough / Martha J. Keough 01-26-99 425-2008 (941)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)