

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 06 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

**DOCUMENT # N46804 (3)**  
1. Corporation Name  
**CAUSEWAY MOBILE HOME OWNERS' ASSOCIATION, INC.**

Principal Place of Business <b>601 SEAWAY DR. LOT MAA FORT PIERCE FL 34949</b>	Mailing Address <b>601 SEAWAY DR. LOT MAA FORT PIERCE FL 34949</b>
---	---



2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified <b>01/13/1992</b>	4. FEI Number <b>65-0379963</b>	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	
		7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No		
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent <b>PARRELLA, ANTHONY 601 SEAWAY DRIVE LOT G5 FORT PIERCE FL 34949</b>	10. Name and Address of New Registered Agent 81 Name <b>RALPH FOULKS</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>601 SEAWAY DR LOT F 5</b> 83 84 City <b>FORT PIERCE</b> 85 Zip Code <b>FL 34949</b>
--	--

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: *Ralph L. Foulks* (NOTE: Registered Agent signature required when reinstating) DATE:

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD PARELLA, ANTHONY 601 SEAWAY DRIVE LOT G 24 FORT PIERCE FL 34949	1.1 TITLE	PD RALPH FOULKS 601 SEAWAY DR LOT F 5 FORT PIERCE FL 34949
TITLE	VD YEAGER, HAROLD 601 SEAWAY DRIVE LOT G 18 FORT PIERCE FL 34949	2.1 TITLE	VD WILLIAM MOLNER 601 SEAWAY DR LOT F 7 FORT PIERCE FL 34949
TITLE	S BATES, EILEEN 601 SEAWAY DRIVE LOT G 11 FORT PIERCE FL 34949	3.1 TITLE	S RUTH CONLEY 601 SEAWAY DR LOT G 23 FORT PIERCE FL 34949
TITLE	TD GARMAN, JUNE 601 SEAWAY DRIVE LOT H 23 FORT PIERCE FL 34949	4.1 TITLE	
TITLE	T DEICHLER, RUTH 601 SEAWAY DR. LOT G5 FORT PIERCE FL	5.1 TITLE	
TITLE		6.1 TITLE	
TITLE		7.1 TITLE	

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.

SIGNATURE: *Ralph L. Foulks* 2-23-98 561-466-9198

CR2E037 (10/97)