

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 26 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N95000000130 (3)**

1. Corporation Name

SUNSHINE MOBILE HOME ASSOCIATION, INC.



Principal Place of Business 7403 46TH AVENUE NORTH LOT 258 ST PETERSBURG FL 33709	Mailing Address 7403 46TH AVENUE NORTH LOT 258 ST PETERSBURG FL 33709-2539
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/27/1994		3a. Date of Last Report 04/04/1996	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		4. FEI Number NOT APPLICABLE		Applied For <input type="checkbox"/> Not Applicable	
22. City & State		27. City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. Zip		28. Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Country		29. Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
NAGLE, GERALDINE 7403 46TH AVENUE NORTH LOT 258 ST PETERSBURG FL 33709				81. Name			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83.			
				84. City			
				85. Zip Code FL			

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 Geraldine Nagle *Geraldine Nagle* March 12, 1997
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	JAMES, JOHN A			1.2 NAME	William Lindauer		
STREET ADDRESS	7403 46TH AVENUE NORTH, LOT 1			1.3 STREET ADDRESS	7403 46th Avenue North, Lot 220		
CITY-ST-ZIP	ST PETERSBURG FL 33709			1.4 CITY-ST-ZIP	St Petersburg, Fl 33709	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE	V	<input type="checkbox"/> DELETE		2.1 TITLE	D Fernand Giguere		
NAME	BERBERIAN, ARAM			2.2 NAME	7403 46th Avenue North, Lot 302		
STREET ADDRESS	7403 46TH AVENUE NORTH, LOT 314			2.3 STREET ADDRESS	St Petersburg, Fl 33709	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
CITY-ST-ZIP	ST PETERSBURG FL 33709			2.4 CITY-ST-ZIP			
TITLE	ST	<input type="checkbox"/> DELETE		3.1 TITLE	D John Burgio	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	NAGLE, GERALDINE			3.2 NAME	7403 46th Avenue North Lot 73		
STREET ADDRESS	7403 46TH AVENUE NORTH, LOT 258			3.3 STREET ADDRESS	St Petersburg, Fl 33709		
CITY-ST-ZIP	ST PETERSBURG FL 33709			3.4 CITY-ST-ZIP			
TITLE	D	<input checked="" type="checkbox"/> DELETE		4.1 TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	HAWK, WILBUR			4.2 NAME	Hermit O Smith		
STREET ADDRESS	7403 46TH AVENUE NORTH, LOT 189			4.3 STREET ADDRESS	7403 46th Avenue North, Lot 255		
CITY-ST-ZIP	ST PETERSBURG FL 33709			4.4 CITY-ST-ZIP	St Petersburg, Fl 33709		
TITLE	D	<input checked="" type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SMITH, HERMIT			5.2 NAME			
STREET ADDRESS	7403 46TH AVE N LOT 255			5.3 STREET ADDRESS			
CITY-ST-ZIP	ST PETERSBURG FL 33709			5.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEBLANC, LAWRENCE			6.2 NAME			
STREET ADDRESS	7403 46TH AVE N LOT 337			6.3 STREET ADDRESS			
CITY-ST-ZIP	ST PETERSBURG FL 33709			6.4 CITY-ST-ZIP			

14. I do 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: Geraldine Nagle *Geraldine Nagle* 3-19-97 813-541-6703
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0050585

CR2E037 (9/96)