

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 20, 1999 8:00 am**  
**Secretary of State**

02-20-1999 90066 013 \*\*\*\*61.25

**DOCUMENT # N95000000130**

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



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

12/27/1994

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

NAGLE, GERALDINE  
7403 46TH AVENUE NORTH  
LOT 258  
ST PETERSBURG FL 33709

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 Secretary/Treasurer 2-3-99*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

☐ DELETE

TITLE

D

NAME

LINDAUER, WILLIAM

STREET ADDRESS

7403 46TH AVE N, LOT 220

CITY-ST-ZIP

ST PETERSBURG FL

TITLE

V

NAME

BERBERIAN, ARAM

STREET ADDRESS

7403 46TH AVENUE NORTH, LOT 314

CITY-ST-ZIP

ST PETERSBURG FL 33709

TITLE

ST

NAME

NAGLE, GERALDINE

STREET ADDRESS

7403 46TH AVENUE NORTH, LOT 258

CITY-ST-ZIP

ST PETERSBURG FL 33709

TITLE

P

NAME

SMITH, KERMIT O

STREET ADDRESS

7403 46TH AVE N LOT 255

CITY-ST-ZIP

ST PETERSBURG FL

TITLE

D

NAME

BURGIO, JOHN

STREET ADDRESS

7403 46TH AVE NORTH LOT 73

CITY-ST-ZIP

ST PETERSBURG FL

TITLE

D

NAME

LEBLANC, LAWRENCE

STREET ADDRESS

7403 46TH AVE N LOT 337

CITY-ST-ZIP

ST PETERSBURG FL 33709

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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

*Geraldine Nagle Secretary/Treasurer 2-3-99 727-541-6703*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)