

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000001188

1. Entity Name

PALM HAVEN MOBILE HOME OWNERS ASSOCIATION INC.

**FILED**  
**Feb 15, 2000 8:00 am**  
**Secretary of State**

02-15-2000 90043 042 \*\*\*\*61.25

Principal Place of Business	Mailing Address
3301 58TH AVE. NORTH #139 ST. PETERSBURG FL 33714	3301 58TH AVE. NORTH #139 ST. PETERSBURG FL 33714-1339

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number		Applied For	
59-3306975		Not Applicable	
5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
MOUND, L 3301 59TH AVE N 455 ST PETE FL 33714		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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD	TITLE	
NAME	MOUND, L	NAME	
STREET ADDRESS	3301-58TH AVE., NORTH, #205	STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33714	CITY-ST-ZIP	
TITLE	VPD	TITLE	
NAME	KNOTT, W	NAME	
STREET ADDRESS	3301 58TH AVENUE NORTH, #313	STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	CITY-ST-ZIP	
TITLE	SD	TITLE	
NAME	MACFARLAND, VIVIAN	NAME	
STREET ADDRESS	3301-58TH AVE 143	STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33714	CITY-ST-ZIP	
TITLE	TD	TITLE	
NAME	CALNON, JOHN	NAME	
STREET ADDRESS	3301-58TH AVE. #355	STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33714	CITY-ST-ZIP	
TITLE	VD	TITLE	
NAME	BOLES, GERALD	NAME	
STREET ADDRESS	3301-58TH AVE. NORTH, #237	STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33714	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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: John Calnon DATE: 2-11-00 DAYTIME PHONE: 737-528-1977