

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000002955 (1)

1. Corporation Name

**SHELDON MOBILE HOME PARK HOME OWNER TENANT ASS.
INC**

Principal Place of Business

**2333 GRIFFIN ROAD
FORT LAUDERDALE FL 33312**

Mailing Address

**4708 SW 23RD TERRACE
FORT LAUDERDALE FL 33312**



3. Date Incorporated or Qualified
06/19/1995

3a. Date of Last Report
NONE

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ROULEAU, J. EMILE
4793 SW 23RD TERRACE
FORT LAUDERDALE FL 33312**

81 Name

EMILE ROULEAU

82

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

2333 GRIFFIN ROAD

83

84

City

FORT LAUDERDALE FL

85

Zip Code

33312

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

Emile Rouleau
(Signature, typed or printed name of registered agent and title if applicable)

President
(NOTE: Registered Agent signature required when reinstating)

DATE

3/8/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE
NAME **ROULEAU, J. EMILE**
STREET ADDRESS **2333 GRIFFIN ROAD**
CITY-ST-ZIP **FORT LAUDERDALE FL 33312**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **VD** ☒ DELETE
NAME **CREUIER, ANDRE**
STREET ADDRESS **2333 GRIFFIN ROAD**
CITY-ST-ZIP **FORT LAUDERDALE FL 33312**

2.1 TITLE **VD** ☒ Change ☐ Addition
2.2 NAME **EDWARD CARDINAL**
2.3 STREET ADDRESS **2333 GRIFFIN ROAD**
2.4 CITY-ST-ZIP **FORT LAUDERDALE FL 33312**

TITLE **TD** ☐ DELETE
NAME **FRAPPIER, GERMAIN**
STREET ADDRESS **2333 GRIFFIN ROAD**
CITY-ST-ZIP **FORT LAUDERDALE FL 33312**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **SD** ☐ DELETE
NAME **BERNARD, LYSE**
STREET ADDRESS **2333 GRIFFIN ROAD**
CITY-ST-ZIP **FORT LAUDERDALE FL 33312**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **D** ☒ DELETE
NAME **RENAUD, GERARD**
STREET ADDRESS **2333 GRIFFIN ROAD**
CITY-ST-ZIP **FORT LAUDERDALE FL 33312**

5.1 TITLE **D** ☒ Change ☐ Addition
5.2 NAME **CREUIER ANDRE**
5.3 STREET ADDRESS **2333 GRIFFIN ROAD**
5.4 CITY-ST-ZIP **FORT LAUDERDALE FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: **LYSE BERNARD** *Lyse Bernard*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **5/14-435-7727**
Daytime Phone #

CR2E037 (12/95)

pm 3-14-96