FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N95000002955 (1) DOCUMENT

SHELDON MOBILE HOME PARK HOME OWNER TENANT ASS. INC

Principal Place of Business Mailing Address

FILED Feb 27 1997 8:00am Secretary of State



2333 GRIFFIN REFORT LAUDERD		4708 SW 23RD TERRACE FORT LAUDERDALE FL 33312-5943				F			
						3. Date Incorporated or Qualified 06/19/1995	3a. Date	of Lat 13/14/	st Report 1996
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number APPLIED FOR 45-0	7/901	3	Applied For Not Applicable	
Suite, Apt. #	ŧ, elc.	Suite, Apt. #, etc.			Certificate of Status Desired		\$8.7	5 Additional	
22 City & State		City & State							Required
City & State	•	28				6. Election Campaign Financing Trust Fund Contribution			00 May Be led to Fees
Zip 24	Country 25	Zip 29	30 Cou	ntry			Yes 🗀	No	er s. 199.032,
	9. Name and Address of Current	Registered Agent		841		10. Name and Address of New Reg	Istered A	gent	
DOLU EA	14 5 FAME			81	Name				
ROULEAU, J. EMILE 2333 GRIFFIN RD				82	Street	dress (P.O. Box Number is Not Acceptable)			
FORT LA	UDERDALE FL 33312			83					
				84	City		FL	85 2	Zip Code
11. Pursuant to	o the provisions of Sections 617.0502	and 617.1508, Florida Statu	tes, the at	DOVE	-named	corporation submits this statement for the pu	rpose of c	hangir	ng its registered
office or re agent. I an	egistered agent, or both, in the State on familiar with, and accept the obligation	of Florida. Such change was tions of, Section 617.0503, Fl	authorize: lorida Stat	d by utes	the corp	poration's board of directors. I hereby accept	the appo	intmen	as registered
SIGNATURE _									
	Signature, typed or printed name of registered agen			d Age	nt signature	required when reinstating)	DATE	DIDEO	TODO 111 10
12.	OFFICERS AND	DELETE	13. 1,1 Ti	TI E	.,	ADDITIONS/CHANGES TO OFFICE	····	Chan	
NAME	ROULEAU, J. EMILE	- Orter	1,1 11 1,2 N/						iga L. Monosii
STREET ADDRESS	2333 GRIFFIN ROAD				ADDRESS				
CITY-ST-ZIP	FORT LAUDERDALE FL 33312		1,4 Ci						
TITLE	D	DELETE	2.1 TI					Char	ge Addition
NAME	CREUIER, ANDRE		2.2 N/	AME					
STREET ADDRESS	2333 GRIFFIN ROAD		2.3 S1	TREET	ADDRESS	2			
CITY - \$1 - ZIP	FORT LAUDERDALE FL 33312		2.4 C	ITY-S	ST-ZIP				
TITLE	TD	DELETE	3.1 16	7LE				Char	ige 🔲 Addition
NAME	Frappier, Germain		3.2 N/	AME					
STREET ADDRESS	2333 GRIFFIN ROAD		3.3 S1	TREET	ADDRESS				
CITY - ST - ZIP	FORT LAUDERDALE FL 33312				T-ZIP			1 65	
TITLE	SD BEDNADD 1905	☐ DELETE	4.1 [[i	Char	• . · · · · · · · · · · · · · · · · · ·
NAME	BERNARD, LYSE		4. 2 N						- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
STREET ADDRESS	2333 GRIFFIN ROAD FORT LAUDERDALE FL 33312	ı	1	THEET ITY - S'	ADDRESS				
CITY-ST-7IP TITLE	VD	DELETE	5.1 TI		1-210	VP		X Char	nge 🔲 Addition
NAME	CARDINAL, EDWARD		5.2 N/				•		
STREET ADDRESS	2333 GRIFFIN RD				ADDRESS	HOZAIRE DALLAIRE			
CITY-ST-ZIP	FORT LAUDERDALE FL				T - ZIP	FORT LAUDERDULE	FL		
TITLE		☐ DELETE	6.1 TI				,	Char	nge 🔲 Addition
NAME			6.2 N	AME					
STREET ADDRESS			6.3 S	TREET	ADDRESS				
CITY-ST-ZIP			6.4 CI	ITY-S	T-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.