

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001716

FILED
Feb 05, 2004
Secretary of State**Entity Name:** SHADY LANE MOBILE HOME PARK HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**15400 ROOSEVELT BLVD #624
CLEARWATER, FL 33760 US**New Principal Place of Business:****Current Mailing Address:**15400 ROOSEVELT BLVD #624
CLEARWATER, FL 33760 US**New Mailing Address:****FEI Number:** 59-3497886**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SEGIEN, RONALD P
15400 ROOSEVELT BLVD #624
CLEARWATER, FL 33760 US**Name and Address of New Registered Agent:**SEGIEN, RONALD P
15400 ROOSEVELT BLVD #624
CLEARWATER, FL 33760 US

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: RONALD SEGIEN

02/05/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ONEILL, PEGGY
Address: 15400 ROOSEVELT BLVD #608
City-St-Zip: CLEARWATER, FL 33760 US

Title: VP () Delete
Name: SEGIEN, RONALD
Address: 15400 ROOSEVELT BLVD #424
City-St-Zip: CLEARWATER, FL 33760

Title: T () Delete
Name: CHEVILEAR, LAURA
Address: 15400 ROOSEVELT BLVD #103
City-St-Zip: CLEARWATER, FL 33760

Title: S () Delete
Name: SNODDGRASS, LAURA
Address: 15400 ROOSEVELT BLVD #326
City-St-Zip: CLEARWATER, FL 33760

Title: D () Delete
Name: MULLONG, JACK
Address: 15400 ROOSEVELT BLVD #221
City-St-Zip: CLEARWATER, FL 33760

Title: D () Delete
Name: SEGIEN, MARGARET
Address: 15400 ROOSEVELT BLVD #624
City-St-Zip: CLEARWATER, FL 33760

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RONALD SEGIEN

VP

02/05/2004

Electronic Signature of Signing Officer or Director

Date