


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90069 004 ****61.25

DOCUMENT # N96000001937			
1. Entity Name HAPPY TRAILS MOBILE HOMEOWNERS ASSOCIATION II, INC.			
Principal Place of Business 2261 GULF TO BAY BLVD CLEARWATER, FL 33765 US		Mailing Address 1266 S PINELLAS AVENUE TARPON SPRINGS, FL 34689 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent JOSEPH, JUSTIN G 1266 S PINELLAS AVENUE TARPON SPRINGS, FL 34689		7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WEISE, WILLIAM 2261 GULF TO BAY BLVD # 136 CLEARWATER, FL 33765 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CONNIE PURDIE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2261 GULF TO BAY BLVD # 220 CLEARWATER, FL 33765
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S OWEN, RHIND 2261 GULF TO BAY BLVD # 331 CLEARWATER, FL 33765 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KAREN CONLEY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2261 GULF TO BAY BLVD # 313 CLEARWATER, FL 33765
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROSS, MARY 2611 GULF TO BAY BLVD # 239 CLEARWATER, FL 33765 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WILLIAM PURDIE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2261 GULF TO BAY BLVD # 220 CLEARWATER, FL 33765
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JAMES, MARY LOUISE 2261 GULF TO BAY BLVD # 121 CLEARWATER, FL 33765 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WILLIAM WEISE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2261 GULF TO BAY BLVD # 136 CLEARWATER, FL 33765
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEMBER AT LARGE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition JAMES CONLEY 2261 GULF TO BAY BLVD # 313 CLEARWATER, FL 33765
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Karen A. Conley, Secretary 4/15/07 727-524-3600 X
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 7054