2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N96000001937



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

May 04, 2007 8:00 am Secretary of State

FILED

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					E ITAMIEL DIA ME		IB ar eni eg ini 11		(1870) (1781	
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04112007 (Chg-NP	CR2E0	37 (12/06)	
City & State ;		City & State	City & State		I. FEI Number 59-34586	20		1	Applied For	
Zip	Country	Zip	Country	5	5. Certificate of	Status Desired		\$8.75 A	Additional	
	6. Name and Address of Current R	legistered Agent	nd Agent			7. Name and Address of New Registered Agent				
100551			Name							
JOSEPH, JUSTIN G 1266 S PINELLAS AVENUE TARPON SPRINGS, FL 34689				Street Address (P.O. Box Number is Not Acceptable)						
			City				FL	Zip C	ode	
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										
SIGNATURE		nd title if applicable. (NOTE:	Registered Agent signature	re required whe	en reinstating)		DATE			
SIGNATURE		9. Election Camp Trust Fund Co	paign Financing		5.00 May Be dided to Fees		DATE Iake chec Ida Depai			
SIGNATURE	Signature, typed or printed name of registered agent at Filling Fee is \$61.25	9. Election Camp Trust Fund Co	paign Financing	\$5 D Ad	5.00 May Be olded to Fees		lake chec rida Depai	tment of	State IN 10	
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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.