2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000070222

1. Entity Name

SHADY OAKS RV & MOBILE HOME PARK, INC.



FILED Jan 23, 2003 8:00 am Secretary of State

01-23-2003 90122 037 ***150.00

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6. Name and Address of Current Registered Agent Name	OID TOWN LEFT.					4. }	010735-00	0	No	t Applicable	
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Street Address (P.O. Boy Number is Not Acceptable) HC3 BOS 348 OLD TOWN FJ. 32680 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 FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 After May 1		6. Name and Address of Current I		Name	/. 1	Name and Address of New F	registered Age	nı			
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8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III. ITILE PCCS OFFICERS AND DIRECTORS III. ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	m and the second				010 -	TOL	311)	٠,			
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12. Thereby 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		pertify that the information supplied with	this filling does not qualify for			Section 1	119 07(3)(i) Florida Statutos	I further certific	that the in	formation	

indicated on this report or suppliemental 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 607, 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:

IGNATURE AND PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-21-03

498 7270 Daytime Phone # CR2E034 (10/0