

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000023696

1. Entity Name

FAIRVIEW MOBILE ESTATES, INC.



Principal Place of Business

37400 CHANCEY ROAD
ZEPHYRHILLS, FL 33541

Mailing Address

37400 CHANCEY ROAD
ZEPHYRHILLS, FL 33541



01122006

No Chg-P

CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

72-1575971

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WHITE, JOANNE
37400 CHANCEY ROAD
ZEPHYRHILLS, FL 33541

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	WHITE, JAMES L
STREET ADDRESS	37400 CHANCEY ROAD
CITY-ST-ZIP	ZEPHYRHILLS, FL 33541
TITLE	VPST
NAME	WHITE, JOANNE
STREET ADDRESS	37400 CHANCEY ROAD
CITY-ST-ZIP	ZEPHYRHILLS, FL 33541
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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**DO NOT WRITE
IN THIS SPACE**

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 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: Joanne White Joanne White

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/18/06 x 813 783 1644
Date Daytime Phone #