

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000047039

FILED
Jan 06, 2012
Secretary of State

Entity Name: HI-OAKS MHP, INC.

Current Principal Place of Business:

6604 HARNEY ROAD
SUITE K
TAMPA, FL 33610 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 320625
C/O TOM WILSON
TAMPA, FL 336790625 US

New Mailing Address:

FEI Number: 84-1641238 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WILSON, THOMAS L
4600 W SUNSET BLVD
TAMPA, FL 33629 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD
Name: PROSEN, RAYMOND J
Address: 6604 HARNEY ROAD, SUITE K
City-St-Zip: TAMPA, FL 33610 US

Title: SD
Name: WILSON, THOMAS L
Address: 6604 HARNEY ROAD, SUITE K
City-St-Zip: TAMPA, FL 33610 US

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS L WILSON

SD

01/06/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date