

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000027837

FILED
Feb 09, 2011
Secretary of State

Entity Name: JAY MAY MOBILE HOME PARK, INC.

Current Principal Place of Business:

9438 US HIGHWAY 19
SUITE 239
PORT RICHEY, FL 34668 US

New Principal Place of Business:

1045 HICKORY LANE
UNIT 6
HOLIDAY, FL 34691 US

Current Mailing Address:

9438 US HIGHWAY 19
SUITE 239
PORT RICHEY, FL 34668 US

New Mailing Address:

8421 W. SCOTT COURT
HOMOSASSA, FL 34448 US

FEI Number: 26-4560446

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, HALLIE M
9438 US HIGHWAY 19
SUITE 239
PORT RICHEY, FL FL US

Name and Address of New Registered Agent:

COHEN, HALLIE M
1045 HICKORY LANE
UNIT 6
HOLIDAY, FL 34691 US

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:

02/09/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: COHEN, NORMAN JAY
Address: 1045 HICKORY LANE, UNIT 6
City-St-Zip: HOLIDAY, FL 34691 US

Title: STD
Name: COHEN, HALLIE M
Address: 1045 HICKORY LANE, UNIT 6
City-St-Zip: HOLIDAY, FL 34691 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: NORMAN JAY COHEN

PRES

02/09/2011

Electronic Signature of Signing Officer or Director

Date