2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: FRANKLIN L. ROSE TREASURER TO SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 11, 2004 8:00 am DOCUMENT # P93000017229 **Secretary of State** 02-11-2004 90027 012 ***150.00 PARADISE POINT MOBILE HOME PARK, INC. Mailing Address Principal Place of Business 99 SEASIDE 99 SEASIDE KEY LARGO FL 33037 KEY LARGO FL 33037 2. Principal Place of Business 3. Mailing Address 99 SEASIDE SAME Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) Applied For City & State 4. FEI Number City & State NO-T APPLICABLE Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired MONRUE 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent FRANKLIN L. ROSE ROSE, LORRAINE Street Address (P.O. Box Number is Not Acceptable) 99 SEASIDE AVE KEY LARGO FL 33037 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 FRANKLIN L. ROSE Franklin FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 10. SYLVIA ZOLOT, PREIDENT WChange 99 SEASIDE AVENUE KEY LARGO, FLORIDA Delete TITLE TITI F NELSON, RAMON NAME NAME STREET ADDRESS STREET ADDRESS 99 SEASIDE AVE CITY-ST-ZIP KEY LARGO FL 33037 CITY-ST-7IP LORRAINE F. ROSE, VILE WYChange PRESIDENT 49 SEMSIDE AUE Delete TITLE TITLE CALANTY, MARVIN NAME NAME 99 SEASIDE STREET ADDRESS STREET ADDRESS KEYLARGO, FLORIDA 33037 KEY LARGO FL 33037 CITY-ST-ZiP CITY-ST-7IP THERINE BRADSHAW Delete TITLE TITLE NAME NAME NELSON, PAULINE. STREET ADDRESS STREET ADDRESS 99 SEASIDE AVE CITY-ST-ZIP CITY-ST-ZIP KEY LARGO FL 33037 Delete TREASURER TITLE CALANTY, BARBARA NAME 99 SEASIDE AUE #13 STREET ADDRESS STREET ADDRESS 99 SEASIDE AVE KEY LARGO FL 33037 CITY-ST-ZIP CITY-ST-7IP Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby 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 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.

FILED