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PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 1. Corporation Name



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P93000052377 (7)

SIGNATURE: SIGNATURE AND TYPED OF SIGNING OFFICER OR DIRECTOR

IN TOWN MOBILE HOME PARK, INC.

| IN TOWN MOBILE HOME PAHK, INC. | | | | | | | |
|---|--|---|---|---|---|------------------------------|---|
| Principal Place | of Business | Mailing Address | | | | 00111 00111 80 101 | WINNE 17890 ENIN 19811 (WBI 1881 |
| 6415 MASSACHUSETTS AVENUE NEW PORT RICHEY FL 34653 | | 6415 MASSACHUSETTS AVENUE NEW PORT RICHEY FL 34653 | | | | | |
| | | | | | 3. Date Incorporated or Qualific 07/22/1993 | | ite of Last Report 04/11/1995 |
| | ace of Business | 2a. Mailing Address | | | 4. FEI Number 59-3206566 | | Applied For |
| Suite, Apt. | #. etc. | Suite, Apt. #, etc. | | | 38-3200300 | | Not Applicate |
| 22 | 1000 | 27 | | | 5. Certificate of Status Desired | | \$8.75 Additional Fee Required |
| City & State | ; | Orty & State | | | 6. Election Campaign Financing | · | \$5.00 May Be |
| 23 <i>Z</i> ip | Country | [28] | T Courte | | Trust Fund Contribution | <u></u> | Added to Fees |
| 24 | 25 | 29 | Gounte 30 | y | This corporation has liability Florida Statutes | for intangible.' Yes ∷∏No | tax under s. 199.032, |
| .:1 | 9. Name and Address of Cur | | | | 10. Name and Address of New | | d Agent |
| | The state of the s | | 81 | Name | | | |
| SPALDI, CHERYL 1033 CHABLIS CT. | | | 82 | Street Add | dress (P.O. Box Number is Not Accer | otable) | |
| | | | | | | | |
| DUNEDI | N FL 34653 | | 83 | | | | |
| | | | 84 | City | | Fl | 85 Zip Code |
| SIGNATURE . | | ection 607.0505, Florida Statute | | | | | |
| tamiliar wit SIGNATURF _ | Styriature, types or printed name of registance a | gend and the dappleaton (f | VOTE Flogisharad Age | rt sącatore ശ്വധ | | DATÉ | |
| tamiliar wit SIGNATURE _ 12. | Styriature, types or printed name of registance a | | | r t Sajavatory respon | जा कालाकार्वाताचुर ADDITIONS/CHANGES TO C | DEFICERS AN | |
| tamiliar wit SIGNATURE _ 12. | Signature types or printed name of registerics a OFFICERS. D SPALDI, SANDRA | good and the diapplication (f AND DIRECTORS | VOTE Registered Age | ரி தெ.விஸ் ம்றம | | DEFICERS AN | D DIRECTORS IN 12 |
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