2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000030681

Entity Name: GRAND ISLAND MOBILE PARK ASSN., INC.

FILED Feb 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2785 S BAY ST SUITE G EUSTIS, FL 32726 **Current Mailing Address: New Mailing Address:** P.O. BOX 350524 GRAND ISLAND, FL 327350524 FEI Number: 59-3237250 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CROAK, MICHAEL A 2785 S BAY STREET SUITE G EUSTIS, FL 32726 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition HAGY, ANTON J NAGY, ANTON J Name: Name: #9 36530 S FISHCAMP RD #3 36530 S FISHCAMP RD Address: Address: City-St-Zip: GRAND ISLAND, FL 32735 City-St-Zip: GRAND ISLAND, FL 32735 Title: Title: () Delete () Change () Addition BURLEY, JODI Name: Name: #20 36530 S. FISHCAMP ROAD Address: Address: GRAND ISLAND, FL 32735 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition MARTIN, WILLARD L MARTIN, WILLARD L Name: Name: #11 36530 S FISHCAMP RD #12 36530 S FISHCAMP RD Address: Address: GRAND ISLAND, FL 32735 City-St-Zip: GRAND ISLAND, FL 32735 City-St-Zip: () Delete Title: VΡ Title: () Change () Addition BROKAW, JANET Name: Name: #9 36530 S FISHCAMP RD Address: Address: City-St-Zip: City-St-Zip: GRAND ISLAND, FL 32735 Title: Title: () Delete (X) Change () Addition PRICE, BARBARA Name: Name: PRICE, BARBARA # 9 36530 S FISHCAMP RD Address: # 14 36530 S FISHCAMP RD Address: City-St-Zip: GRAND ISLAND, FL 32735 City-St-Zip: GRAND ISLAND, FL 32735

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: WILLARD L MARTIN T 02/16/2009