2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000045849

**FILED
Mar 22, 2011
Secretary of State**

Entity Name: SOUTHWINDS MOBILE HOME PARK, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
1425 RITTER RD LAKELAND, FL 33810	1425 RITTER RD #36 LAKELAND, FL 33810

Current Mailing Address:	**New Mailing Address:**
2090 GIBSONIA - GALLOWAY RD LAKELAND, FL 33810	

FEI Number: 59-3330519   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:**
SPIVEY, OLIN J 2090 GIBSONIA - GALLOWAY RD LAKELAND, FL 33810 US	SPIVEY, OLIN J SR. 2090 GIBSONIA - GALLOWAY RD LAKELAND, FL 33810 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: OLIN J. SPIVEY, SR.   03/22/2011

          Electronic Signature of Registered Agent   Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SPIVEY, OLIN J SR.
Address: 2090 GIBSONIA - GALLOWAY RD
City-St-Zip: LAKELAND, FL 33810

Title: STD
Name: SPIVEY, SHIRLEY J
Address: 2090 GIBSONIA-GALLOWAY ROAD
City-St-Zip: LAKELAND, FL 33810

Title: VPD
Name: SPIVEY, LETTY J
Address: 1425 RITTER ROAD #36
City-St-Zip: LAKELAND, FL 33810 US

Title: VPD
Name: WATSON, DANNY J VPD
Address: 5425 LEWELLYN ROAD
City-St-Zip: LAKELAND, FL 33810 US

Title: VPD
Name: WATSON, APRIL S VPD
Address: 5425 LEWELLYN ROAD
City-St-Zip: LAKELAND, FL 33810 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: OLIN J. SPIVEY, SR.   PR   03/22/2011

          Electronic Signature of Signing Officer or Director   Date