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May 19 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000050662 (1)**

1. Corporation Name
GREEN ACRES MOBILE HOME PARK, INC.

Principal Place of Business	Mailing Address
~~12804 SW 115 CT.~~ 12804 SW 115 CT ~~MIAMI FL 33176~~	~~12804 SW 115 CT.~~ 12804 SW 115 CT ~~MIAMI FL 33176-4472~~

2. Principal Place of Business	2a. Mailing Address
12804 SW 115 CT	12804 SW 115 CT
21 ~~11000 SW 121 ST~~	26 ~~11000 SW 121 ST~~
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: MIAMI, FL	28 City & State: MIAMI, FL
24 Zip: 33176 25 Country: USA	29 Zip: 33176 30 Country: USA

3. Date Incorporated or Qualified: 06/13/1996
3a. Date of Last Report:
4. FEI Number: 65-0673026 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

~~STURGILLE, MICHAEL SR.~~
~~12804 SW 115 CT.~~
~~MIAMI FL 33176~~

10. Name and Address of New Registered Agent

81 Name: JOSEPH A. PEREIRA, JR
82 Street Address (P.O. Box Number is Not Acceptable): 10300 SW 72 ST #470C
83
84 City: MIAMI FL 85 Zip Code: 33173

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Joseph A Pereira Jr JOSEPH A. PEREIRA JR 1/14/96
(Signature, typed or printed name of registered agent, and title if applicable) (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PRESIDENT/DIRECTOR	☒ DELETE	1.1 TITLE	P.V.T.S.D	☒ Change ☐ Addition
NAME	MICHAEL STURGILLE, JR		1.2 NAME	MICHAEL K. STURGILLE	
STREET ADDRESS	11000 SW 121 ST		1.3 STREET ADDRESS	12804 SW 115 CT.	
CITY-ST-ZIP	MIAMI, FL 33176		1.4 CITY-ST-ZIP	MIAMI FLA 33176	
TITLE	SEC/TREAS/DIRECTOR	☒ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	MICHAEL STURGILLE, SR		2.2 NAME		
STREET ADDRESS	12804 SW 115 CT		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33176		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

CS 5/19/97
DOD $165

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed or added in an attachment with an address.