## **2004 FOR PROFIT CORPORATION ANNUAL REPORT**

## Jan 20, 2004 08:00 AM **Secretary of State DOCUMENT # P99000092641** 1. Entity Name M & M MOBILE HOME PARK, INCORPORATED Principal Place of Business Mailing Address 4900 N.E. SPINNAKER POINT PL. 4900 N.E. SPINNAKER POINT PL. STUART, FL 34996 STUART, FL 34996 01132004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number 65-0971293 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE MATAKAETIS, MICHAEL J 4900 N.E. SPINNAKER POINT PL. STUART, FL 34996 IN THIS SPACE 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. (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. MATAKAETIS, MICHAEL J NAME STREET ADDRESS 4900 N.E. SPINNAKER POINT PL. CITY-ST-ZIP STUART, FL 34996 U000000009094 TITLE 01/20**/04-**80**031-**015 150.**00** NAME STREET ADDRESS CITY - ST - ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 of 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 an interimptorered.

SIGNATURE:

CITY-ST-ZIP

IGNING OFFICER OR DIRECTOR

**FILED**