

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 18, 2000 8:00 am**
Secretary of State

01-18-2000 90188 021 ***150.00

DOCUMENT # S76636

1. Entity Name

BROOKS MOBILE HOME PARK, INC.

Principal Place of Business

Mailing Address

**2035 REYNOLDS ROAD
LAKELAND FL 33801
US****107 PALENCIA ROAD
AUBURNDALE FL 33823-3021**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3078318**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GRAY, MARGARET
107 PALENCIA DRIVE
AUBURNDALE FL 33823**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	GRAY, MARGARET	107 PALENCIA ROAD	AUBURNDALE FL	<input type="checkbox"/>
SD	BROOKS, THOMAS	1112 TIMBERGREEN DR	LAKELAND FL 33809	<input type="checkbox"/>
D	BROOKS, JOHN	1420 N. LAKE BONNY DRIVE	LAKELAND FL	<input type="checkbox"/>
D	BROOKS, RONALD	P.O. BOX 2241	EATON PARK FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
D	BROOKS, RONALD	3201 CYPRESS TRAILS DRIVE	POLK CITY, FL 33868	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

863-967-3258

SIGNATURE:

Margaret H. Gray **Margaret H. Gray** Jan 07, 2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)