

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703416

Entity Name: FLORIDA MANUFACTURED HOUSING ASSOCIATION, INC.**Current Principal Place of Business:**1284 TIMBERLANE ROAD
TALLAHASSEE, FL 32312**Current Mailing Address:**1284 TIMBERLANE ROAD
TALLAHASSEE, FL 32312 US**FEI Number:** 59-0691506**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AYOTTE, JAMES R
1112 LOCH KNOLL COURT
TALLAHASSEE, FL 32312 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:** JAMES R. AYOTTE

01/10/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name STEINER, MATTHEW
Address OLD FIREHOUSE #8, 401 S. ALBANY AVENUE
City-State-Zip: TAMPA FL 33606

Title D
Name CASHIN, KEN DIR
Address 732 BLOUNTSTOWN HWY
City-State-Zip: TALLAHASSEE FL 32304

Title PRESIDENT
Name KELLY, MARK
Address 605 SOUTH FRONTAGE ROAD
City-State-Zip: PLANT CITY FL 33563

Title VP
Name WEIS, NICOLE
Address P.O. BOX 234
City-State-Zip: ST. PETERSBURG FL 33731

Title RA
Name AYOTTE, JAMES R
Address 1284 TIMBERLANE ROAD
City-State-Zip: TALLAHASSEE FL 32312

Title TREASURER
Name SELBY, DWIGHT
Address 200 E. GRANADA BLVD., SUITE 207
City-State-Zip: ORMOND BEACH FL 32176

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES R. AYOTTE**REGISTERED AGENT**

01/10/2018

Electronic Signature of Signing Officer/Director Detail

Date