

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09289

Entity Name: COUNTRY VILLAGE MOBILE HOMEOWNERS ASSOCIATION, INC.**FILED**
Feb 08, 2013
Secretary of State
CC0084337006**Current Principal Place of Business:**10516 FITTING LN.
HUDSON, FL 34667-4908**Current Mailing Address:**10516 FITTING LN.
HUDSON, FL 34667-4908 US**FEI Number: 59-2905207****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CANNATA, SHERRY J
10516 FITTING LN
HUDSON, FL 34667-4908 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	ST
Name	CANNATA, SHERRY J
Address	10516 FITTING LN.
City-State-Zip:	HUDSON FL 34667-4908

Title	PRESIDENT
Name	MONTGOMERY, TOM
Address	10504 BECOMING DRIVE
City-State-Zip:	HUDSON FL 34667-4908

Title	TR
Name	EGLINTON, ALLEN
Address	10512 BECOMING DRIVE
City-State-Zip:	HUDSON FL 34667

Title	TR
Name	LAPATRA, BILL
Address	10509 FITTING LANE
City-State-Zip:	HUDSON FL 34667

Title	VP
Name	LOFTUS, AMBROSE
Address	10521 FITTING LANE
City-State-Zip:	HUDSON FL 34667

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: SHERRY J. CANNATA**SECRETARY/TREASURER 02/08/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date