2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005794

Entity Name: SOUTHFORK MOBILE HOME OWNERS ASSN. INC.

FILED Feb 10, 2021 Secretary of State 9760292947CC

Current Principal Place of Business:

10852 TUMBLEWEED DR DADE CITY. FL 33525

Current Mailing Address:

10852 TUMBLEWEED DR DADE CITY, FL 33525 US

FEI Number: 59-3218261 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CADY, DOROTHY E 11131 PALAMINO DR DADE CITY, FL 33525 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: DOROTHY E. CADY 02/10/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	Р	Title	VP

Name GERRISH, HARRY Name WHITE, RON

Address 11045 PALAMINO DRIVE Address 11115 MESQUITE DRIVE

City-State-Zip: DADE CITY FL 33525

City-State-Zip: DADE CITY FL 33525

Title SEC Title TREASURER

 Name
 WAY, PAM
 Name
 CADY, DOROTHY E

 Address
 11048 EWING DRIVE
 Address
 38725 BRAHMAN DRIVE

 City-State-Zip:
 DADE CITY FL 33525
 City-State-Zip:
 DADE CITY FL 33525

Title D Title D

NameDOUGHERTY, ROBERTNameELDER, DONNAAddress11141 PALAMINO DRAddress11055 EWING DRIVECity-State-Zip:DADE CITY FL 33525City-State-Zip:DADE CITY FL 33525

Title D Title D

Name SUSAN, KERSCHNER Name FLANAGAN, TOM

Address 38750 BRONCO DR Address 11041 MUSTANG DRIVE
City-State-Zip: DADE CITY FL 33525
City-State-Zip: DADE CITY FL 33525

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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: DOROTHY E. CADY TREASURER 02/10/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name LYNCH, ROBERT

Address 11021 MESQUITE DRIVE City-State-Zip: DADE CITY FL 33525