

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M43700

**Entity Name:** GABLES TRAILER PARK, INC.

**Current Principal Place of Business:**

825-935-955 S.W. 44TH AVENUE  
MIAMI, FL 33134

**Current Mailing Address:**

BURLEIGH KAPLAN  
5838 COLONY COURT  
BOCA RATON, FL 33433-5202 US

**FEI Number:** 59-2749644

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KAPLAN, BURLEIGH  
5838 COLONY COURT  
BOCA RATON, FL 33433-5202 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 PSTD  
Name KAPLAN, BURLEIGH  
Address 5838 COLONY COURT  
City-State-Zip: BOCA RATON FL 33433-5202

Title D  
Name KAPLAN, LILY  
Address 5838 COLONY COURT  
City-State-Zip: BOCA RATON FL 33433-5202

Title D  
Name HOWARD, CYNTHIA  
Address 3062 NW 61ST ST.  
City-State-Zip: BOCA RATON FL 33196

Title D  
Name KAPLAN, CHERYL  
Address 1331 BRICKELL BAY DRIVE APT.  
#2703  
City-State-Zip: MIAMI FL 33131

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

**SIGNATURE:** BURLEIGH KAPLAN

**PRESIDENT**

**01/09/2013**

Electronic Signature of Signing Officer/Director Detail

Date