

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000031246

Entity Name: SPECIALIZED MOBILE HOME SERVICES, INC.

Current Principal Place of Business:

845 WEST LAKE WALES ROAD NORTH
LAKE WALES, FL 33859

Current Mailing Address:

845 WEST LAKE WALES ROAD NORTH
LAKE WALES, FL 33859

FEI Number: 06-1716928

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRIFFIN, STEVEN C
845 WEST LAKE WALES ROAD NORTH
LAKE WALES, FL 33859 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 GRIFFIN, STEVEN C
Address 845 WEST LAKE WALES ROAD
NORTH
City-State-Zip: LAKE WALES FL 33859

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: STEVEN C. GRIFFIN

PRESIDENT

01/24/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date