

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 90235 026 ****61.25

DOCUMENT # N01000002794



1. Entity Name
**OAK HILL MOBILE HOME PARK HOMEOWNER'S ASSOCIATIO
N, INCORPORATED**

Principal Place of Business
**1331 OAKHILL ST
LOT 75
LAKELAND FL 33815**

Mailing Address
**1331 OAKHILL ST
LOT 75
LAKELAND FL 33815**

2. Principal Place of Business
1331 Oakhill St.

3. Mailing Address
1331 Oakhill St.

Suite, Apt. #, etc.
Lot # 70

Suite, Apt. #, etc.
Lot # 70

City & State
Lakeland, FL

City & State
Lakeland, FL

4. FEI Number **58-1596884**

Applied For
 Not Applicable

Zip
33815

Country
Polk

Zip
33815

Country
Polk

5. Certificate of Status Desired **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**EVANS, CAROL
1331 OAKHILL ST
LOT 70
LAKELAND FL 33815**

Name **same**

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Carol Evans, president**

Carol Evans, Pres 3/18/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | |
|--|--|
| TITLE PT | <input checked="" type="checkbox"/> Delete |
| NAME MCNULTY, JAMES P | |
| STREET ADDRESS 1331 OAKHILL ST | |
| CITY-ST-ZIP LAKELAND FL 33815 | |
| TITLE VT | <input type="checkbox"/> Delete |
| NAME FAIRCHILD, CAROL | |
| STREET ADDRESS 1331 OAKHILL ST | |
| CITY-ST-ZIP LAKELAND FL 33815 | |
| TITLE ST | <input type="checkbox"/> Delete |
| NAME EVANS, CAROL | |
| STREET ADDRESS 1331 OAKHILL ST | |
| CITY-ST-ZIP LAKELAND FL 33815 | |
| TITLE | <input type="checkbox"/> Delete |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Delete |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Delete |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

| | |
|---|--|
| TITLE President | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME Carol Evans | |
| STREET ADDRESS 1331 Oakhill St. lot# 70 | |
| CITY-ST-ZIP | |
| TITLE Secy/Treas. | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME Carol Fairchild | |
| STREET ADDRESS 1331 Oakhill St. lot# 37 | |
| CITY-ST-ZIP | |
| TITLE vice-pres. | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME Frederick Muller | |
| STREET ADDRESS 1331 Oakhill St. lot# 18 | |
| CITY-ST-ZIP Lakeland, FL 33815 | |
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Signature Required Pres. 3/18/03*

CR2E037 (10/02)