

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02889

FILED  
Apr 14, 2010  
Secretary of State

**Entity Name:** SALT SPRINGS MOBILE HOME ASSOCIATION, INC.

**Current Principal Place of Business:**

25190 NE 139TH PLACE  
SALT SPRINGS, FL 32134 US

**New Principal Place of Business:**

25224 NE 137 LANE  
SALT SPRINGS, FL 32134 US

**Current Mailing Address:**

25190 NE 139TH PLACE  
SALT SPRINGS, FL 32134 US

**New Mailing Address:**

25224 NE 137 LANE  
SALT SPRINGS, FL 32134 US

**FEI Number:** 59-2620494

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEBLANC, CHERYL L  
25190 NE 139TH PLACE  
SALT SPRINGS, FL 32134 US

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

DEAN, JOHN W  
25224 NE 137 LANE  
SALT SPRINGS, FL 32134 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: JOHN W. DEAN

04/14/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: DEAN, JOHN W  
Address: 25224 NE 137 LANE  
City-St-Zip: SALT SPRINGS, FL 32134

Title: V  
Name: BABCOCK, DWIGHT  
Address: 25211 NE 136 LANE  
City-St-Zip: SALT SPRINGS, FL 32134

Title: S  
Name: BARNETT, PATRICE  
Address: 25180 NE 129 ST.  
City-St-Zip: SALT SPRINGS, FL 32134 US

Title: T  
Name: KIRBY, LOU ANN  
Address: 25250 NE 139 PL.  
City-St-Zip: SALT SPRINGS, FL 32134

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: JOHN W. DEAN

PRES

04/14/2010

Electronic Signature of Signing Officer or Director

Date