DOCUMENT # N04000001618

1. Entity Name

OAK HAVEN MOBILEHOME OWNERS ASSOCIATION, INC.

FILED

05 MAR -9 PM 4:22

2/16/05 90056 044 #61.25

1st MOORE CR2E037 (10/04)

Principal Place of Business	Mailing Address
10307 SW LETTUCE LAKE AVENUE MH-213 ARCADIA FL 34269	10307 SW LETTUCE LAKE AVENUE MH-213 ARCADIA FL 34269

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 412128738 NONE ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

WILSON, MABLE
10307 SW LETTUCE LAKE AVENUE MH-213
ARCADIA FL 34269

7. Name and Address of New Registered Agent

Name: Joy Brunett

Street Address (P.O. Box Number is Not Acceptable): 10307 S.W. Lettuce Lake Ave., M.H. 227

City: Arcadia FL Zip Code: 34269

9. 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: Joy Brunett
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
Due By May 1, 2005

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BECKNER, TED 10307 SW LETTUCE LAKE AVENUE MH-213 ARCADIA FL 34269	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD COPPOLA, TERESA 10307 SW LETTUCE LAKE AVENUE MH-213 ARCADIA FL 34269	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WILSON, MABLE 10307 SW LETTUCE LAKE AVENUE MH-213 ARCADIA FL 34269	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Joy Brunett 10307 S.W. Lettuce Lake Ave. M.H. 227 Arcadia Fla. 34269 ☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BECKNER, JOANNE 10307 SW LETTUCE LAKE AVENUE MH-213 ARCADIA FL 34269	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: Teresa Coppola Teresa Coppola Feb 7 2005 863-494-2975

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

cr# 0091 $ 61.25 7-69-05