2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32397

Entity Name: OAK HARBOR OF HAINES CITY MOBILE HOMEOWNERS

ASSOCIATION, INC.

Current Principal Place of Business:

352 OAK HARBOR CP HAINES CITY, FL 33844

Current Mailing Address:

352 OAK HARBOR CP HAINES CITY, FL 33844 US

FEI Number: 59-2953833 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILLER, PATRICIA 352 OAK HARBOR CP HAINES CITY, FL 33844 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: PATRICIA MILLER 03/04/2013

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VP

NameBINKLEY, RICKNameFLANNERY, CAROLAddress356 OAK HARBOR CPAddress302 OAK HARBOR CPCity-State-Zip:HAINES CITY FL 33844City-State-Zip:HAINES CITY FL 33844

TitleSECRETARY-TREASURERTitleDIRECTORNameMILLER, PATRICIANameKURZ, LINDA

Address 352 OAK HARBOR CP Address 315 OAK HARBOR CP
City-State-Zip: HAINES CITY FL 33844
City-State-Zip: HAINES CITY FL 33844

Title **DIRECTOR** Title DIRECTOR Name TOLBERT, PAUL Name BOTELHO, BILLY Address 355 OAK HARBOR CP 349 OAK HARBOR CP Address City-State-Zip: HAINES CITY FL 33844 HAINES CITY FL 33844 City-State-Zip:

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: PATRICIA MILLER

SECRETARY-TREASURER 03/04/2013

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 04, 2013

Secretary of State

CC7956941560