2014 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 02/25/2014

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

Title **DIRECTOR** Title SECRETARY-TREASURER BOTELHO, BILLY Name MILLER, PATRICIA Name Address 352 OAK HARBOR CP Address 349 OAK HARBOR CP City-State-Zip: HAINES CITY FL 33844 City-State-Zip: HAINES CITY FL 33844

TitleDIRECTORTitleDIRECTORNameTOLBERT, PAULNameFALK, RENIE

Address 355 OAK HARBOR CP Address 354 OAK HARBOR CP
City-State-Zip: HAINES CITY FL 33844
City-State-Zip: HAINES CITY FL 33844

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 02/25/2014

Electronic Signature of Signing Officer/Director Detail

Date

FILED Feb 25, 2014

Secretary of State

CC7840789718