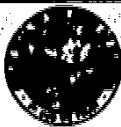


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 JUN 23 AM 9:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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*****233.75 *****233.75

DO NOT WRITE IN THIS SPACE.

DOCUMENT # 515658
1. Corporation Name
Recreation World, Inc.

Principal Place of Business Mailing Address
**13906 W. Colonial Dr.
Winter Garden, FL 34787**

3. Date Incorporated or Qualified 3a. Date of Last Report

10-1-76

2. Principal Place of Business

2a. Mailing Address

21 see above

26 see above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 see above

27 see above

City & State

City & State

23 see above

28 see above

Zip

Country

Zip

Country

24 see above

25 USA

29 SEE ABOVE

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**Eric Mashburn
102 E. Maple St.
Winter Garden, FL 34787**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

NOTE: Registered Agent signature required when reappointing.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**President
Donald L. McNamara
6232 Wynfield Ct.
Orlando, FL 32819**

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP
**Chairman
Donald L. McNamara
6232 Wynfield Ct.
Orlando, FL 32819**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
Richard F. Rocha
16525 Majestic Ct.
Clermont, FL 34711**

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP
**P
Richard F. Rocha
16525 Majestic Ct.
Clermont, FL 34711**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S/T
Rick C. Bourn
5891 Windhover Ct.
Orlando, FL 32819**

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP
**vp
Ronald K. Fleming
2118 Whitfield Lane
Orlando, FL 32835**

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP
**D
Elizabeth McNamara
6232 Wynfield Ct.
Orlando, FL 32819**

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

See Title

5/31/95

107/656644