

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

MAY - 1 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K33887 (6)**
1. Corporation Name
SILVER CREEK R.V. RESORT, INC.

Principal Place of Business: **100 U.S. HIGHWAY 1
FLORIDA CITY FL 33034**
Mailing Address: **100 U.S. HIGHWAY 1
FLORIDA CITY FL 33034**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Organized 09/23/1988	3a. Date of Last Report 05/01/1994
4. FID Number 65-0076294	Applied For <input type="checkbox"/> Not Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Does this corporation have any Trust Fund Contributions? <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Does this corporation have liability for unreported tax under 218 for Florida Statutes? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. State of Inc.	26. State of Inc.
22. City or Town	27. City or Town
23. Zip	28. Zip
24. Name	29. Name
25. Address	30. Address

9. Name and Address of Current Registered Agent

**WAWRZYNIAK, JOSEPH
100 U.S. HWY ONE
HOMESTEAD FL 33034**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box, Apartment, Etc.)

83. City

84. State **FL**

85. Zip

11. I, the undersigned, hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that the information furnished herein is true and correct to the best of my knowledge and belief, and that the information furnished herein is true and correct to the best of my knowledge and belief.

12. Name and Address of Officer or Director	13. Name and Address of Officer or Director
PD WAWRZYNIAK, JOSEPH 100 U.S. HWY. 1 FLORIDA CITY FL VST WAWRZYNIAK, CAROL 100 US HWY ONE FLORIDA CITY FL D WAWRZYNIAK, CAROL 100 US HWY ONE FLORIDA CITY FL	PD WAWRZYNIAK, JOSEPH 100 U.S. HWY. 1 FLORIDA CITY FL VST WAWRZYNIAK, CAROL 100 US HWY ONE FLORIDA CITY FL D WAWRZYNIAK, CAROL 100 US HWY ONE FLORIDA CITY FL

14. I, the undersigned, hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that the information furnished herein is true and correct to the best of my knowledge and belief, and that the information furnished herein is true and correct to the best of my knowledge and belief.

SIGNATURE: *Carol Wawrzyniak* **CAROL WAWRZYNIAK** 5-1-95 1305)247-3200
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR