


FILE NOW: FILING FEE IS \$61.25

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Apr 26, 1999 8:00 am  
Secretary of State

04-26-1999 90127 005 \*\*\*\*61.25

NONPROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N33770

1. Corporation Name

THE GREAT OUTDOORS PREMIER R.V./GOLF RESORT II C  
ONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

135 PLANTATION DR  
TITUSVILLE FL 32780  
US

Mailing Address

135 PLANTATION DR  
TITUSVILLE FL 32780  
US



2. Principal Place of Business	2a. Mailing Address	3. Date incorporated or Qualified
21 145 PLANTATION DRIVE	26 145 PLANTATION DRIVE	08/17/1989
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
22	27	4. FEI Number
City & State	City & State	59-2964959
23 TITUSVILLE, FL	28 TITUSVILLE, FL	Applied For
Zip Country	Zip Country	No: Applicable
24 32780 25 BREVARD	29 32780 30 BREVARD	5. Certificate of Status Desired <input type="checkbox"/>
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent

~~BEALS, ROBERT L.  
1800 W. HIBICUS BLVD  
STE. 138  
MELBOURNE FL 32902~~

81 Name	85 Zip Code
JOHN H. EVANS	32780
82 Street Address (P.O. Box Number is Not Acceptable)	
1702 S. WASHINGTON AVE.	
83	
84 City	
TITUSVILLE FL	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

*[Signature]*

(NOTE: Registered Agent signature required when reinstating)

DATE

4/16/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D GRITTER, WILL <input type="checkbox"/> DELETE	1.1 TITLE	DP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GRITTER, WILL	1.2 NAME	MCDONALD, KEITH
STREET ADDRESS	135 PLANTATION DR.	1.3 STREET ADDRESS	145 PLANTATION DRIVE
CITY-ST-ZIP	TITUSVILLE FL	1.4 CITY-ST-ZIP	TITUSVILLE, FL 32780
TITLE	D <input checked="" type="checkbox"/> DELETE	2.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HEROUX, HERB	2.2 NAME	JOHNSON, LOIS
STREET ADDRESS	135 PLANTATION DR.	2.3 STREET ADDRESS	145 PLANTATION DRIVE
CITY-ST-ZIP	TITUSVILLE FL 32780	2.4 CITY-ST-ZIP	TITUSVILLE, FL 32780
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GITRE, FRANK	3.2 NAME	
STREET ADDRESS	135 PLANTATION DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	TITUSVILLE FL 32780	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-99

Date

268-9767

Daytime Phone #

0015251

CR2E037 (11/98)