## **2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

## **FILED** Mar 04, 2005 8:00 am Secretary of State

DOCUMENT # N33770  1. Entity Name THE GREAT OUTDOORS PREMIER R.V./GOLF RESORT II CONDOMINIUM ASSOCIATION, INC.									•	042 ****6	1.25
145 PLANTATION DR 145			iling Address 15 PLANTATION DR TUSVILLE, FL 32780 US								
2. Principal Place of Business		3. Mail	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				<del></del> ,	02022005	Chg-NP	CR2	E037 (10/03)	
City & State		City & State					4. FEI Numbe 59-296				oplied For
Zip	Country	Zip		Çou	intry		5. Certificate	of Status Desir	ed 🔲	\$8.75 Add	ditional
	6. Name and Address of Currer	ıt Registere	d Agent				7. Name and	Address of N	w Register	<u>-</u>	
WIKOX POPERT M					Name Wilcox, Robert m.						
WIKOY, ROBERT M 100-D PLANTATION DRIVE TITUSVILLE, FL 32780					Street Address (P.O. Box Number is Not Acceptable)						
	,										
•					City				F	Zip Cod	е
the obligat	named entity submits this statement ions of registered agent.	for the purpo	ose of changing its	registere	ed office o	r register	ed agent, or bot	h, in the State	of Florida. I a	nm familiar with,	and accept
SIGNATURE .											
	Signature, typed or printed name of registered age	nt and title if appl	cable. (NOTE	Registered	i Agent signat	ure required	when reinstating)		DAT	E	
	Signature, typed or printed name of registered age Filling Fee is \$61.25 Due by May 1, 2005	nt and title if appl	9. Election Carr Trust Fund C	paign Fi	inancing		\$5.00 May B Added to Fees	6	Make ch	eck payable to partment of Si	
10.	Filing Fee is \$61.25 Due by May 1, 2005 OFFICERS AND D		9. Election Carr Trust Fund C	paign Fi ontributi	inancing on.		\$5.00 May B Added to Fees		Make che Florida Der	eck payable to partment of Si DIRECTORS IN	10
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12. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the (eceiver or trugtee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an eddress, with all step like empowered.

**SIGNATURE:** 

KEITH

mcDonald

(321) 268-9767