FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE NAME

STREET ADDRESS

Block 12 or Block 13 if changed, or on an attachment with an address

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 20 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000011239 (0)

BAY AIRE R.V. PARK, INC.

Principal Place of Business Mailing Address							
	ALTERNATE 19	2242 US ALTERNATE 19					
PALM HARBOR FL 34683 PALM HARBOR FL 34683					DO NOT WRITE IN THIS SPACE		
•					3. Date Incorporated or Qualified		
					12/10/1992		
2. Princi	2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Aı	oplied For
21		26			59-3154890	N	ot Applicable
Suite,	Suite, Apt. #, etc. Suite, Apt. #, etc. 27				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & 23	Stato	City & State			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	Zip	Count	у	8. This corporation owes or has paid the curr	ent year In	tangible
24	25	29	30				□Ño
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registered	Agent	
	ROMANO, GLORIA C		8	1 Name			
2242 US ALTERNATE 19			8	82 Street Address (P.O. Box Number is Not Acceptable)			
	PALM HARBOR FL 34683			<u> </u>			
			8	'			
1			8	City	FL	85 Zip	Code
44 Duro	uant to the provisions of Sections 607.0	602 and 607 1609. Florida Statuto	s the abo	yo pamod coro		changing i	te ragistared
office	or registered agent, or both, in the Sta	ite of Florida. Such change was a	uthorized I	by the corporati	oration submits this statement for the purpose of ion's board of directors. I heroby accept the app	ointment as	registered
		igations of, Section 607.0505, Floi	nda Statut	es.			
SIGNATU	Signature, typed or printed name of registered.	sgent and title if applicable (NOTE:	Registered A	gent signature require	ad whon reinstating) DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12
TITLE	PSD	☐ DELETE	1.1 TITLE			Change	Addition
NAME	ROMANO, GLORIA C		1.2 NAM	:			
STREET ADD			1.3 STRE	T ADDRESS			
CITY-ST-ZIF	, , , , , , , , , , , , , , , , , , , ,			ST-ZIP		<u> </u>	Lagren
TITLE	VD EDEO	☐ DELFTE	. 2.1 TITLE			☐ Change	Addition
NAME	BRUNO, FRED 150 NYATT RD		2.2 NAM				
STREET ADD	DADDINOTON DI			ET ADDRESS	1		
CITY-ST-ZIF	VDT	DELETE	2. 4 CITY 3.1 TITLE			Change	Addition
NAME	MUSCHE, FRANK W	Last Occept	3.2 NAM	ĺ		S.iungo	rodicol
STREET ADD	AAA DI PAAALIT AT			T ADDRESS			
CITY-ST-ZIF	DULLEODD DI		3.4. C/TY				
TITLE		DELETE	4.1 TITLE		· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
NAME			4 2 NAM	i			
STREET ADD	RESS		4 3 STRE	T ADDRESS			
CITY-ST-ZIF	,		4.4 CITY	ST-ZIP			
TITLE		DELETE	5 1 1/TLE			☐ Change	Addition
NAME			5.2 NAMI				
STREET ADD	9246		5 A OTDE	l			
	1500		53 STRE	T ADDRESS			
CITY-ST-7IF		□ DELETE	54 C/TY-			Change	Addition

DELETE

6.1 TITLE

6.2 NAME

63 STREET ADDRESS

6.4 CITY-ST-ZIP 14. Thereby 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 logal 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