

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000033148

FILED
Jan 05, 2004
Secretary of State

Entity Name: GILBERT R V INSURANCE, INC.

Current Principal Place of Business:

5780 S SEMORAN BLVD
ORLANDO, FL 32822 US

New Principal Place of Business:

Current Mailing Address:

5780 S SEMORAN BLVD
ORLANDO, FL 32822 US

New Mailing Address:

FEI Number: 59-3238005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELL, DOUG
201 S MONROE ST 2ND FLR
TALLAHASSEE, FL 32301

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: HALL, RANDY
Address: 548 CEDAR FOREST CR
City-St-Zip: ORLANDO, FL 32828

Title: P () Delete
Name: GILBERT, ALAN W.
Address: 11126 SHADY OAK ST
City-St-Zip: ORLANDO, FL 32832

Title: VT () Delete
Name: GILBERT, TERESA
Address: 11126 SHADY OAK ST.
City-St-Zip: ORLANDO, FL 32832

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: GILBERT, ALAN W
Address: 11126 SHADY OAK ST
City-St-Zip: ORLANDO, FL 32832

Title: VT (X) Change () Addition
Name: GILBERT, TERESA G
Address: 11126 SHADY OAK ST.
City-St-Zip: ORLANDO, FL 32832

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALAN W. GILBERT

P

01/05/2004

Electronic Signature of Signing Officer or Director

Date