## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# F07228

Nov 01, 2006 Secretary of State

**FILED** 

Entity Name: HOLIDAY TRAVEL PARK CO-OP, INC. **Current Principal Place of Business: New Principal Place of Business:** 2261 OLD DIXIE HWY BUNNELL, FL 32110 US **Current Mailing Address: New Mailing Address:** 2261 OLD DIXIE HWY **OFFICE** BUNNELL, FL 32110 US FEI Number: 59-2094700 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KNIGHT, JERRY C ANASTASI, ROBERTA T 4721 E MOODY BLVD 2261 S OLD DIXIE HWY BLDG 5 STE 505 & 506 BUNNELL, FL 32110 BUNNELL, FL 32110 US 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: ROBERTA T. ANASTASI 11/01/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition BUDDINGS, ARIE Name: Name: 2261 S. OLD DIXIE HWY, LOT 132 Address: Address: City-St-Zip: BUNNELL, FL 32110 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: WILCOX, GEORGE Name: 2261 S OLD DIXIE HWY LOT 117 Address: Address: BUNNELL, FL 32110 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete (X) Change ( ) Addition WYMAN, BUEL Name: RANDY, CAYCE Name: 2261 S. OLD DIXIE HWY, LOT 91 2261 S. OLD DIXIE HWY, LOT118 Address: Address: City-St-Zip: BUNNELL, FL 32110 City-St-Zip: BUNNELL, FL 32110 Title: () Delete Title: () Change () Addition HUGHES, GORDON Name: Name: Address: 2261 S. OLD DIXIE HWY, LOT 90 Address: City-St-Zip: City-St-Zip: BUNNELL, FL 32110 Title: Title: () Delete () Change () Addition GREENLAW, GORDON Name: Name: 2261 S. OLD DIXIE HWY, LOT 100 Address: Address: City-St-Zip: BUNNELL, FL 32110 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: RANDY CAYCE T 11/01/2006