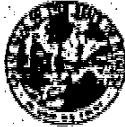


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 JAN 25 PM 2:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 349523

(1)

1. Corporation Name

ARVEE DONA-BAY INC

Principal Place of Business

C/O ROYAL COACHMEN RESORT  
1070 LAUREL RD. E.  
NOKOMIS FL 34275

Mailing Address

C/O ROYAL COACHMEN RESORT  
1070 LAUREL RD. E.  
NOKOMIS FL 34275

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/14/1969

3a. Date of Last Report

02/16/1994

4. FEI Number

59-1267780

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

LEVINE, LESTER I.  
1070 E LAUREL RD  
LAUREL FL 34275

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME LEVINE, LESTER I  
STREET ADDRESS 545 SANCTUARY DR., PHA  
CITY-ST-ZIP LONGBOAT KEY FL

TITLE SD  
NAME LEVINE, NANCY  
STREET ADDRESS 545 SANCTUARY DR., PHA  
CITY-ST-ZIP LONGBOAT KEY FL

TITLE VT  
NAME LEVINE, NANCY  
STREET ADDRESS 545 SANCTUARY DR., PHA  
CITY-ST-ZIP LONGBOAT KEY FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

887 1130

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PDC  
1.2 NAME LEVINE, LESTER I  
1.3 STREET ADDRESS 545 SANCTUARY DR., PHA  
1.4 CITY-ST-ZIP LONGBOAT KEY FL  
☒ Change ☐ Addition

2.1 TITLE D  
2.2 NAME JILL LITMAN  
2.3 STREET ADDRESS 103 FERRY LANE  
2.4 CITY-ST-ZIP BARRINGTON, R.I. 02806  
☐ Change ☒ Addition

3.1 TITLE D  
3.2 NAME AIMEE LEVINE DICKMAN  
3.3 STREET ADDRESS 1122 6TH ST. #202  
3.4 CITY-ST-ZIP Santa Monica, Calif. 90403  
☐ Change ☒ Addition

4.1 TITLE VD  
4.2 NAME MICHAEL D. LEVINE  
4.3 STREET ADDRESS 1109 Delacroix Circle  
4.4 CITY-ST-ZIP Nokomis, FL. 34275  
☐ Change ☒ Addition

5.1 TITLE VD  
5.2 NAME BRIAN M. LEVINE  
5.3 STREET ADDRESS 637 N. Michigan Dr.  
5.4 CITY-ST-ZIP Venice, FL. 34293  
☐ Change ☒ Addition

6.1 TITLE D  
6.2 NAME LISA LEE LEVINE  
6.3 STREET ADDRESS 118 Arbor Ridge Dr.  
6.4 CITY-ST-ZIP Antioch, TN. 37013  
☐ Change ☒ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or not an attachment with an address.

SIGNATURE:

LEVINE, LESTER I.

1/15/95 813 488 9674