

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

FILED
Jan 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 542677 (0)

1. Corporation Name **R. V. WORLD, INC., OF NOKOMIS**



Principal Place of Business 2110 N. TAMiami TRAIL NOKOMIS FL 34275	Mailing Address 2110 N. TAMiami TRAIL NOKOMIS FL 34275
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/10/1977	
21	26	4. FEI Number 59-1761500		Applied For <input type="checkbox"/> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22 City & State		27 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23 Zip Country		28 Zip Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
24 Zip		25 Country		29 Zip	
30 Country					

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
GERZENY, RUBEN 2110 N. TAMiami TRAIL NOKOMIS FL 33555				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City FL 85 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GERZENY, RUBEN	1.2 NAME	
STREET ADDRESS	2110 N. TAMiami TRAIL	1.3 STREET ADDRESS	
CITY - ST - ZIP	NOKOMIS FL	1.4 CITY - ST - ZIP	
TITLE	SVD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GERZENY, BEVERLY	2.2 NAME	
STREET ADDRESS	2110 N. TAMiami TRAIL	2.3 STREET ADDRESS	
CITY - ST - ZIP	NOKOMIS FL	2.4 CITY - ST - ZIP	
TITLE	VD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIDSON EDDIE	3.2 NAME	
STREET ADDRESS	2110 N TAMiami TRAIL	3.3 STREET ADDRESS	
CITY - ST - ZIP	NOKOMIS FL	3.4 CITY - ST - ZIP	
TITLE	VD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GERZENY MATTHEW	4.2 NAME	
STREET ADDRESS	2110 N TAMiami TRAIL	4.3 STREET ADDRESS	
CITY - ST - ZIP	NOKOMIS FL	4.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GERZENY DAVID	5.2 NAME	
STREET ADDRESS	2110 N TAMiami TRAIL	5.3 STREET ADDRESS	
CITY - ST - ZIP	NOKOMIS FL	5.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GERZENY STEVEN	6.2 NAME	
STREET ADDRESS	2110 N TAMiami TRAIL	6.3 STREET ADDRESS	
CITY - ST - ZIP	NOKOMIS FL	6.4 CITY - ST - ZIP	

14. 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 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 on an attachment with an address.

SIGNATURE: *[Signature]* **RE REQUIRED** 1-6-98 941-966-2182

CR2E034 (10/97)