

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2006 8:00 am
Secretary of State

07-13-2006 90029 001 *****8.75
07-13-2006 90029 002 *****61.25

DOCUMENT # 762139

1. Entity Name
CHRISTMAS AIRSTREAM PARK COOPERATIVE, INC.



Principal Place of Business
25525 E COLONIAL DR
CHRISTMAS, FL 32709

Mailing Address
25525 E COLONIAL DR
CHRISTMAS, FL 32709

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07082006

Chg-NP

CR2E037 (4/06)

4. FEI Number
59-2112286

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

EDDINGER, GARY
25505 E COLONIAL DR
2
CHRISTMAS, FL 32709

Name
GARY EDDINGER
Street Address (P.O. Box Number is Not Acceptable)

25525 E. Colonial Dr
City
CHRISTMAS

FL Zip Code
32709

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

GARY EDDINGER **GARY EDDINGER**

7-9-06

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
COB
HOOVER, EDWARD
25525 E. COLONIAL DR.
CHRISTMAS, FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
EDDINGER, GARY
25525 E COLONIAL DR
CHRISTMAS, FL 32709 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
MCCLELLAND, ROGER
25525 E COLONIAL DR.
CHRISTMAS, FL 32709 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
WISE, ROBERT
25025 E COLONIAL DR
CHRISTMAS, FL 32709 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SAMPSON, DOROTHY
1501 MINNESOTA AVE
ST CLOUD, FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
STERN, Warren
25525 E Colonial Dr
Christmas, FL 32709 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
Edinger, Gary
25525 E Colonial Dr.
Christmas, FL 32709 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
Sacchetta Don
25525 E. Colonial Dr.
Christmas, FL 32709 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GARY EDDINGER **GARY EDDINGER**

7-9-06

407-671-0731

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #