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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 832214 (1) 1. Corporation Name OUTDOOR RESORTS REALTY COMPANY  Principal Place of Business Mailing Address						
2400 CRESTMOOR RD NASHVILLE TN 37215 2400 CRESTMOOR RD NASHVILLE TN 37215-2032			2			
					3. Date Incorporated or Qualified 04/22/1974	3a. Date of Last Report 04/22/1996
2. Principal Pi	2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21 26					59-1571055	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 22					5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State City & State			·····		6. Election Campaign Financing	\$5.00 May Be
23		28			1 rust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for	
24	9. Name and Address of Curren	1 Registered Agent	[30]		Florida Statutes  10. Name and Address of New Re	Yes No
HOL.	NSON, SCOTT J.	r riogistarou Agont	B1	Name	10, Marile dilo Address of New He	gistorea Agent
TWO S. ORANGE AVENUE						
ORLANDO FL 32801				Street A	ddress (P.O. Box Number is Not Acceptab	ole)
			83			
	•		84	City		85 7ip Code
						<b>FL</b>   [ `
11. Pursuant t office or re agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida. Such change was ations of, Section 607.0505, F	ites, the above authorized by forida Statule:	e-named o the corp s.	corporation submits this statement for the poration's board of directors, I hereby acceptant	ourpose of changing its registered of the appointment as registered
SIGNATURE	Signature, typed or printed name of registered age	ol and to all supplicable. (NO	76 Broketovad Apr	ad e ecolose e	equied when reinstating)	DATE
12.	OFFICERS AND		<b>■ 13</b> .	- a o granne i	ADDITIONS/CHANGES TO OFFIC	
TITLE	AVP	DELLIE	1,1 ]/[[[	·T		Change Addition
NAME	NIXON, JANE					1
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP	CHOKOLOSKEE FL		1.4 CDY-S	1 - ZIP		
TITLE	P P P P P P P P P P P P P P P P P P P	DELETE	2.1 TITLE		b	Change
NAME CYDEET ADDRESS	HENDERSON, RANDALL E JR. 2400 CRESTMOOR RD	•	2.2 NAME	ADDIO OO	BLACKBURN, GEORGE M. 2400 CRESTMOOR ROAD	1
STREET ADDRESS CITY-ST-ZIP	NASHVILLE TN		23 STREET 2 4 City-1	· 1	NASHVILLE, TN	
TITLE	ST	DELFTE	31 TITLE	21 - 514.	ST	Change Addition
NAME	PETTY, RONALD W		3.2 NAME	j	LECKRONE, DAVE	
STREET ADDRESS	2400 CRESTMOOR RD		3.3 STREET	ADDRESS	2400 CRESTMOOR ROAD	
CITY-ST-ZIP	NASHVILLE TN		3.4, CITY -	I	NASHVILLE, TN	
TITLE		☐ DELFTE	4.1 TITLE	1		Change Addition
NAME			4. 2 NAME	ļ		
STREET ADDRESS			4.3 STREET			į
CITY-ST-ZIP		DELFTE	4.4 CHY- S	I - ZIP		Change Addition
TITLE NAME		L) Office	5.1 TALE 5.2 NAME	1		CT CHANGE CT MOUTION
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - S			
TITLE		DELETE	6.1 TrillE	. 211		Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 <b>(</b> \$1R\$E1	ADORESS		
CITY-ST-ZIP			6.4 P/11Y - S	1-2IP		1

14. I do hereby certify that the information supplied with this filling 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 the corporation or the corporation of the

CICNATURE

Cm. M Bhlush

4-30-97

615-244-5237

**FILED** 

May 08 1997 8:00am

Secretary of State