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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F04157

(6)

FILED Mar 19 1998 8:00am Secretary of State

RICHAI	RD MCKENZIE'S R.V. PARK	, INC.			HI ANN BINI DAN BINA MIN
Principal Place of Business 1825 S. LAKE REEDY BLVD. FROSTPROOF FL 33843 Mailing Address LAKE REEDY BLVD. FROSTPROOF FL 33843			uge	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				11/03/1980	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
26 26 Suite, Apt. #, etc. Suite, Apt. #, etc.			59-2034874	Not Applicable	
22 27 Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State City & State			6 Firstian Compales Firstoins		
28 28				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	
24	25	29	¬ '	Personal Property Tax due June 30.	Yes No
- 1 1	g. Name and Address of Curren		<u> </u>	10. Name and Address of New Registere	
CB	ANO, MARIE ALICE		81 Name		
3995 U.S. HIGHWAY 27 SOUTH			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
LAKE WALES FL 33853			3,1001,7001	reas (1.0. Box radinos is 1101 Acooptable)	
			83		
			64 City		85 Zip Code
			64 City	F	L 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the ab				poration 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. Thereby accept the appointment as registere agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes.					
SIGNATURE	Maniellino	Mario Don	1 store d	100001 3-7-	98
DIGITATIONE	Signature, typed or printed name of registered agri		legistered Agent signature requi	red when revistating) DATE	
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	STD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	MCKENZIE, ESTHER P		1.2 NAME		
STREET ADDRESS	1625 S. LAKE REEDY BLVD.		1.3 STREET ADDRESS		
CFTY-ST-ZIP	FROSTPROOF FL	JE DELETE	1.4 CITY-ST-ZIP		Addition 1
TATLE	PD	DELETE	2.1 TITLE		Change Addition
NAME	MCKENZIE JR, RICHARD M	10	2.2 NAME		
STREET ADDRESS	1772 S. LAKE REEDY BLVD.		2.3 STREET ADDRESS		
CITY-ST-ZIP	FROSTPROOF FL	DELETE	2. 4 CITY-ST-ZIP		Change Addition
TITLE	D McKenzie Sr, Richard M	- Dittell	3.1 TITLE 3.2 NAME		
NAME STREET ADORESS	1825 S. LAKE REEDY BLVD.	deceased.	I		
***************************************	FROSTPROOF FL	weering.	3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	FROSTPHOUT FL	DELETE .	3.4 CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		C3 better	4. 2 NAME		
			4.3 STREET ADDRESS		
STREET ADDRESS			4		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		+
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME ,			6.2 NAME		
STREET ADDRESS	_		6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. Thereby 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:

Eather & Mr Kenice

3/13/98 94/-685-45/9