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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F95000003614 (3) DOCUMENT #

CAMPER CLUBS OF AMERICA, INC.

FILED May 19 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 2800 \$ RURAL RD PO BOX 25286							
TEMPE AZ 85252-3849 TEMPE AZ 85285-5286 US US					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					07/26/1995	I	
2. Principal Pi	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26			86-0685093	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
22		27	<u>-</u>		U. Gorandato di dialat bodined	Fee Required	
City & State	0	City & State			6. Election Campaign Financing	\$5.00 May Be	
23 Zip	Country	28 Zip	Country	 	Trust Fund Contribution	Added to Fees	
24	25	29	30	,	 This corporation owes or has paid the Personal Property Tax due June 30. 	e current year Inlangible	
24	9. Name and Address of Curren	it Registered Agent	1901		10. Name and Address of New Registe		
C T	CORPORATION SYSTEM		81	Name			
	O SOUTH PINE ISLAND ROAD		100	Carrier A.C.	(0.0 p. 1)		
	INTATION FL 33324		82	Street Add	dress (P.O. Box Number is Not Acceptable)		
			83				
			84	City		■■ 85 Zip Code	
]	_	FL	
office or re agent. I a	to the provisions of Sections 607,050 egistered agent, or both, in the State m familiar with land accept the obliga	Z and 607.1508, Flori da St atu of Florida: Such ch ange w as aliens of, Section <mark>607.0505,</mark> F	tes, the abov authorized b lorida Statute	e-named cor y the corpora s.	poration submits this statement for the purporation's board of directors. I hereby accept the	se of changing its registered appointment as registered	
SIGNATURE	Signature, typed or printed name of registered age	nu and attent applicable (NO	It Registered Ag	ent signature requ	ired when reinstating) DA	1E	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	PV	DELETE	1.1 TITLE			Change Addition	
NAME	GERST, MARTIN		1.2 NAME	İ			
STREET ADDRESS	124 EDGEWATER DR.		1.3 STREET	ADDRESS			
CITY-ST-ZIP	GILBERT AZ 85233		1.4 CITY-5	ST-ZIP			
TITLE	FDCON PDADLEY	DELETE	2 1 THTLE			Change Addition	
NAME	EDSON, BRADLEY		22 NAME				
STREET ADDRESS	6021 E. LAFAYETTE BLVD. S COTTSDALE AZ 85251		2 3 STREET				
CITY-ST-ZIP	GUUTTOUALE AZ 63231	☐ DELETE	2. 4 CITY-	ST-ZIP		Change Addition	
TITLE		□1 nere it	3.1 TITLE			☐ Change ☐ Addition	
NAME CTREET KONDECC			3.2 NAME	ADODECC			
STREET ADDRESS CITY-ST-ZIP			3.3 STREET				
TITLE		DELETE	3.4 CITY -	01-71		Change Addition	
NAME			4.2 NAME			L CHAINGE L HOUSE	
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY - S				
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	5.1 TITLE	<u>''</u>		Change Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY-S				
TITLE		☐ DELFTE	6 1 THLE			Change Addition	
NAME			62 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY-S	1 - Z IP			

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 13 if changed, or on an attachment with an address.