

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 12 PH 10:39

DOCUMENT # **G13562** (5)

1. Corporation Name
LECHALET CAMPER SALES, INC.

Principal Place of Business % ROGER D. PARKER 5639 HIGHWAY 231 PANAMA CITY FL 32404	Mailing Address % ROGER D. PARKER 5639 HIGHWAY 231 PANAMA CITY FL 32404
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DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 12/15/1982	3a. Date of Last Report 04/26/1994
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2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number 59-2273032	Applied For Not Applicable
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 City & State	28 City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 Zip	25 Country	29 Zip	30 Country

9. Name and Address of Current Registered Agent PARKER, ROGER D. 5639 HWY. 231 PANAMA CITY FL 32404		10. Name and Address of New Registered Agent	
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 _____ DATE _____
Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DP	PARKER, ROGER D. 5639 HIGHWAY 231 PANAMA CITY FL	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY ST ZIP		1.4 CITY ST ZIP	
TITLE DST	PARKER, KENNETH 5639 HIGHWAY 231 PANAMA CITY FL	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY ST ZIP		2.4 CITY ST ZIP	
TITLE DV	PARKER, PAMELA J. 5639 HIGHWAY 231 PANAMA CITY FL	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY ST ZIP		3.4 CITY ST ZIP	
TITLE		4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY ST ZIP		4.4 CITY ST ZIP	
TITLE		5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY ST ZIP		5.4 CITY ST ZIP	
TITLE		6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY ST ZIP		6.4 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Roger D. Parker* **Roger D. Parker** 4/4/95 769-0894
Signature and typed or printed name of signing officer or director. (Date) (Digital Filing #)