


APPROVED
AND
FILED

97 MAY 27 PM 2:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 97 MAY 27 PM 2:10 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # J15099 1. Corporation Name HILLCREST RV RESORT, INC.					
Principal Place of Business 4421 Lane Rd. Zephyrhills, FL 33541 US				Mailing Address	
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/20/1986	
21 State Apt. #, etc.		26 11401 Hwy. 301 North		3a. Date of Last Report 05/01/1996	
22 City & State		27 Suite, Apt. #, etc.		4. FEI Number 59-2705212	
23 Zip		28 Thonotosassa, FL		Applied For Not Applicable	
24 Country		29 33592		5. Certificate of Status Desired \$8.75 Additional Fee Required	
		30 US		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent GIBBONS, GARY A. 3321 HENDERSON BLVD. TAMPA, FL 33609				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No	
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, to wit, 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.				10. Name and Address of New Registered Agent	
SIGNATURE [Signature of Gary A. Gibbons] GARY A. GIBBONS 5/23/97				81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY - ST - ZIP DPT BLACK, GEORGE L. JR. 11401 Hwy. 301 North Thonotosassa, FL				11. TITLE 12. NAME 13. STREET ADDRESS 14. CITY - ST - ZIP 900002191879--3 -05/27/97--01082--022 ****165.00 ****165.00	
5. TITLE 6. NAME 7. STREET ADDRESS 8. CITY - ST - ZIP				21. TITLE 22. NAME 23. STREET ADDRESS 24. CITY - ST - ZIP	
9. TITLE 10. NAME 11. STREET ADDRESS 12. CITY - ST - ZIP				31. TITLE 32. NAME 33. STREET ADDRESS 34. CITY - ST - ZIP	
13. TITLE 14. NAME 15. STREET ADDRESS 16. CITY - ST - ZIP				41. TITLE 42. NAME 43. STREET ADDRESS 44. CITY - ST - ZIP	
17. TITLE 18. NAME 19. STREET ADDRESS 20. CITY - ST - ZIP				51. TITLE 52. NAME 53. STREET ADDRESS 54. CITY - ST - ZIP	
21. TITLE 22. NAME 23. STREET ADDRESS 24. CITY - ST - ZIP				61. TITLE 62. NAME 63. STREET ADDRESS 64. CITY - ST - ZIP	
14. I, the undersigned, 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: [Signature of George L. Black, Jr.] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				5/23/97 (813) 782-1917 Date Daytime Phone #	