

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

FILED
Jan 30 1998 8:00am
Secretary of State

| | | |
|-------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| PROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|-------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|

DOCUMENT # **J88029** (0)
1. Corporation Name
RIVER OAKS RV, INC.



| | |
|--------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| Principal Place of Business % SCHMIDT, HAROLD E. 12313 SW KINGSWAY CIR LAKE SUZY FL 33821 US | Mailing Address % SCHMIDT, HAROLD E. 12313 SW KINGSWAY CIR LAKE SUZY FL 33821 US |
|--------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|

DO NOT WRITE IN THIS SPACE

| | | | | | |
|-------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 2. Principal Place of Business 21 9770 SW County Rd 769 Suite, Apt. #, etc. 22 | | 2a. Mailing Address 26 9770 S.W. County Rd 769 Suite, Apt. #, etc. 27 | | 3. Date Incorporated or Qualified 08/17/1987 | |
| City & State 23 Arcadia, Florida Zip Country 24 34266 25 US | | City & State 28 Arcadia, Florida Zip Country 29 34266 30 US | | 4. FEI Number 65-0008261 Applied For Not Applicable | |
| | | | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| | | | | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| | | | | 6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |

9. Name and Address of Current Registered Agent

**SCHMIDT, HAROLD E.
12313 SW KINGSWAY CIR
LAKE SUZY FL 33821**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|--------------------------------------------|-------------------------------------------------------|-----------------------------------------------------------------------------------------|
| TITLE | DST <input type="checkbox"/> DELETE | 1.1 TITLE | Dst <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | BISHOP, BRAD | 1.2 NAME | Bishop, Brad |
| STREET ADDRESS | 12077 SW KINGSWAY CIR | 1.3 STREET ADDRESS | 12607 S.W. Kingsway Cir. |
| CITY-ST-ZIP | LAKE SUZY FL | 1.4 CITY-ST-ZIP | LAKE Suzy, FL 34266 |
| TITLE | DPS <input type="checkbox"/> DELETE | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | SCHMIDT, HAROLD E | 2.2 NAME | |
| STREET ADDRESS | 12313 SW KINGSWAY CIR | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | LAKE SUZY FL | 2.4 CITY-ST-ZIP | |
| TITLE | DV <input type="checkbox"/> DELETE | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | SHILLER, FRED | 3.2 NAME | |
| STREET ADDRESS | 5 SABLE DRIVE | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | PUNTA GORDA FL | 3.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 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 | <input type="checkbox"/> DELETE | 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 | <input type="checkbox"/> DELETE | 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 hereby 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:

[Handwritten Signature]

1/22/98

(941) 993-2111

CR2E034 (10/97)