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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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May 01 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K32789

(5)

R/V LAND DEVELOPMENT INC. Principal Place of Business Mailing Address 3323 STEEPLE CHASE LANE KISSIMEE FL 34746 Missimes FL 34746 Missimes FL 343030-4420								
, , , , , , , , , , , , , , , , , , ,		US			9. Date Incorporated or Qualified	les D	ate of Last F	lonart
					3. Date Incorporațed or Qualified 09/09/1988		29/1996	report
2. Principal	Place of Business	2a. Mailing Address	······································		4. FEI Number	V 1/1		oplied For
1		26			65-0076295		} -	ot Applicable
Suite, Api	l. #, etc	Suite, Apt. #, etc.	******	***************************************	5. Certificate of Status Desired		\$8.75	Additional
2		27			b. Certificate of Status Desired		Fee R	equired
— City & Sta	ato	City & State			6. Election Campaign Financing			May Be
3		28	7		Trust Fund Contribution	<u>u</u>		to Fees
- Zφ Σ1	Country	Zip	-	untry	8. This corporation has liability for		tax under s No	5. 199,032,
4	25 9. Name and Address of Curre	29 ant Registered Agent	30	1	Florida Statutes 10. Name and Address of New Re		(*)	
DA	ITTER, RONALD G. C.PA.	A CONTRACTOR A GOIL		81 Name	19, 114110 2114 11410 07, 11411 116	91210100		
	NW 9 ST.					.		·
	MESTEAD FL 33030			82 Street Ad	ddress (P.O. Box Number is Not Acceptat	ole)		
110	meore de dood			83				
		•			·	······································	12-1	
				84 City		FL	85 Zip	Code
11. Pyrsuan	nt to the provisions of Sections 607 05	502 and 607.1508, Florida Statu	ıtes, the ø	bove-named co	orporation submits this statement for the p	ourpose o	f changing i	its registered registered
		te of Florida. Such change was gations of, Section 607.0505, F	authorize lorida Sta	d by the corpor tutes.	orporation submits this statement for the praction's board of directors. I hereby acceptable to the control of	pt the app	OMINIAHU RE	
					quired when re-nstating)	DATE		
SIGNATURE	Signature, typed or publed name of registered a	gent and title if applicable (NO ND DIRECTORS	TE: Registere	ed Agent signature red		DATE	DIRECTO	RS IN 12
SIGNATURE	Shiphidario Apped or paralled narras of registered a OFFICERS AI	gent and title if applicable (NO	13.	nd Agent signature rec	quired when re-nstating)	DATE		
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