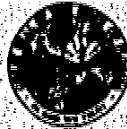


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 17 PM 11:46

DOCUMENT # K34972 (5)

1. Corporation Name

RECREATION INVESTMENTS OF FLORIDA, INC.

Principal Place of Business

% WALTER J. SMITH
1125 HWY #98
DESTIN FL 32541

Mailing Address

% WALTER J. SMITH
1125 HWY #98
DESTIN FL 32541

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/26/1988

3a. Date of Last Report

08/31/1994

4. FEI Number

59-2919107

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21 1125 Hwy 98 East

Suite, Apt. #, etc.

22

City & State

23 Destin, Fla

Zip

24 32541

Country

2a. Mailing Address

26 1125 Hwy 98 East

Suite, Apt. #, etc.

27

City & State

28 Destin FLA

Zip

29 32541

Country

30

9. Name and Address of Current Registered Agent

NORWOOD, CRAIG
1125 HWY. 98 EAST
DESTIN FL 32541

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 the if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME Craig Norwood
STREET ADDRESS 1125 Hwy 98 East
CITY - ST - ZIP Destin FL 32541

TITLE VD
NAME BARRETT, VICTOR L
STREET ADDRESS 1125 HWY 98 EAST
CITY - ST - ZIP Pigeon Forge, TN

TITLE VD
NAME ROCKWELL, DONNEL
STREET ADDRESS 2300 GULF SHORES PKWY.
CITY - ST - ZIP GULF SHORES AL

TITLE TD
NAME ROEDER, MICHAEL
STREET ADDRESS 2575 PARKWAY
CITY - ST - ZIP PIGEON FORGE TN

TITLE VD
NAME WILL, RITTNER
STREET ADDRESS 2575 PARKWAY
CITY - ST - ZIP PIGEON FORGE TN

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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 110.07(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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael M. Roeder, Treasurer

4/3/95

(615) 53-4777
EXT 208