

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

FILED

Apr 21 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **K44190** (2)

1. Corporation Name
GATOR RV RESORT, INC.

Principal Place of Business 5755 E. IRLO BRONSON HWY ST. CLOUD FL 34771	Mailing Address 5755 E. IRLO BRONSON HWY ST. CLOUD FL 34771
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/08/1988	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2917116	
22	City & State	27	City & State	Applied For Not Applicable	
23	Zip	28	Country	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24	Country	29	Country	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
7. Name and Address of Current Registered Agent				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	

**NELSON, ROBERT M
3150 S. FLETCHER AVE.
UNIT 202
FERNANDINA BEACH FL 32034**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	NELSON, ROBERT	1.2 NAME	← duplication
STREET ADDRESS	3150 S. FLETCHER AVE.	1.3 STREET ADDRESS	
CITY - ST - ZIP	FERNANDINA BEACH FL	1.4 CITY - ST - ZIP	
	☒ DELETE		
TITLE	VSD	2.1 TITLE	☐ Change ☐ Addition
NAME	NELSON, ROBERT	2.2 NAME	
STREET ADDRESS	3150 S. FLETCHER AVE.	2.3 STREET ADDRESS	
CITY - ST - ZIP	FERNANDINA BEACH FL	2.4 CITY - ST - ZIP	
	☐ DELETE		
TITLE	PTD	3.1 TITLE	☐ Change ☐ Addition
NAME	PITTMAN, DAVID	3.2 NAME	
STREET ADDRESS	1412 WATERFORD GREEN DR.	3.3 STREET ADDRESS	
CITY - ST - ZIP	MARIETTA GA	3.4 CITY - ST - ZIP	
	☐ DELETE		
TITLE		4.1 TITLE	☐ Change ☒ Addition
NAME		4.2 NAME	VSD STONE, AUBREY L. RT 1 MCRAE, GA.
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
	☐ DELETE		
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
	☐ DELETE		
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	
	☐ DELETE		

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: **David W Pittman** 4/15/98 770 645 4630

CR2E034 (10/97)