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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K67354

(6)

STAGE STOP CAMPGROUND, INC.

	, 110	
Principal Place of Business	Mailing Address	
700 WEST HIGHWAY 50 WINTER GARDEN FL 34787	700 WEST HIGHWAY 50 WINTER GARDEN FL 34787	

## FILED Jan 21 1997 8:00am Secretary of State



WINTER GARDEN FL 34787	WINTER GARDEN FL 34787	WINTER GARDEN FL 34787					
				3. Date Incorporated or Qualified 03/01/1989	3a. Date 01/23		Report
2. Principal Place of Business	2a. Mailing Address	<i>~</i> 1		4. FEI Number		]_/	Applied For
21 14400 W COLONIAL		COLON	IAL DR	59-2933727			Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required
City & State 23	City & State		•	Election Campaign Financing     Trust Fund Contribution			O May Be d to Fees
<b>Ζ</b> ιρ Country <b>25</b>	Zip <b>29</b>	Count	ry	This corporation has liability for in Florida Statutes		ax under No	s. 199.032,
9. Name and Address of Curi		<u> </u>		10. Name and Address of New Re			
SPIGENER, GEORGE C., JR.		8	1 Name				
44 WEST CREST AVENUE		8	2 Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
WINTER GARDEN FL 34787		8	3				
		8	4 City		FL	85 Zij	p Code
11. Pursuant to the provisions of Sections 607.0	CO2 and CO7 1500 Florida Ctat to	as the sha		and the second for th			. 14 1 - 4
office or registered agent, or both, in the Stagent. Lam familiar with, and accept the ob- SIGNATURE Signature, typed or per test name of registered	ligations of Section 607.0505, Flo	orida Statut	by the corporations.  gent signature require		ot the appo	intment a	as registered
	AND DIRECTORS	13.	gent signature require	ADDITIONS/CHANGES TO OFFIC		DIRECTO	ORS IN 12
TITLE VP	DELETE	1,1 TITLE			Ţ	Change	Addition
NAME SPIGENER, GEORGE C., III		1.2 NAM	E				
STREET ADDRESS 516 N MAIN ST		1.3 STRE	ET ADDRESS				
CHY-ST-ZIP WINTER GDN FL	•	1.4 CITY	- ST - ZIP				
TITLE ST	DELETE	2 1 TITLE			. [	Change	Addition
NAME SPIGENER, VIRGINIA B.		2.2 NAM	ŧ				
STREET ADDRESS PO BOX 373		2.3 STRE	ET ADDRESS				
CITY-ST-ZIP FLT ROCK NC		2. 4 CITY	- ST- ZIP				
TITLE P	DELETE	3.1 TITLE		1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,	[	Change	Addition
NAME SPIGENER, GEORGE C JR.		3.2 NAM	E		1.44		
STREET ADDRESS 44 W CREST AVE		3.3 STRE	ET ADDRESS				
CITY-ST-ZIP WINTER GDN FL		3.4 CITY	-ST-ZIP				
TITLE D	☐ DELETE	4.1 TITLE				☐ Change	Addition
NAME SPIGENER, ANNETTE R.		4. 2 NAM	16				
STREET ADDRESS 44 W CREST AVE		4.3 STRE	ET ADDRESS				
CITY-ST ZIP WINTER GDN FL	***************************************	4.4 CITY	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
TITLE	☐ DELETE	5.1 TITLE			Į.	Change	Addition
NAME		5.2 NAM	E				
STREET ADDRESS		5.3 STRE	ET ADDRESS				
COY-ST-ZIF	·	5.4 CITY	- ST- ZIP				· <u>-</u>
TITLE	☐ DELETE	6.1 TITLE			[	] Change	Addition
NAME		6.2 NAM	£				
STREET ADDRESS		6.3 STRE	ET ADDRESS				
City-S1-ZiF		6.4 CITY					
14. I do hereby certify that the information supp	hed with this filing does not qualif	fy for the ex	emption stated	in Section 119 07(3)(i), Florida Statutes	s. I further o	certify the	at the

In a do hereby certify that the information supplied with its filling obes not quality for the exemption stated in Section 119 07(3)(f), Florida Statutes. Frunther 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 33/H changed or on an attachment with an address.

SIGNATURE

SIGNATURE AND THEE OR PRINTED NAME OF STANING OFFICER OF

1-10 - 97

(407)656-8000 Daytime Phone #