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May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # K93964 (0)
1. Corporation Name RECREATIONAL FACTORY WAREHOUSE OF CHARLOTTE, INC



Principal Place of Business: 5112 CENTRAL AVE. CHARLOTTE NC 28205 US
Mailing Address: 3033 MERCY DR. ORLANDO FL 32808-3113 US

3. Date Incorporated or Qualified: 06/08/1989
3a. Date of Last Report: 05/20/1996
4. FEI Number: 59-2969784
5. Certificate of Status Desired: [X] \$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: [X] Yes [] No

2. Principal Place of Business
21. Suite Apt #, etc.
22. City & State
23. Zip Country
24. Zip Country
2a. Mailing Address
26. Suite, Apt #, etc.
27. City & State
28. Zip Country
29. Zip Country

9. Name and Address of Current Registered Agent
EDGAR, CANDICE B.
3033 MERCY DR.
ORLANDO FL 32808

10. Name and Address of New Registered Agent
81 Name: Paul W. Moses II
82 Street Address (P.O. Box Number is Not Acceptable): Maguire, Voorhis & Wells, P.A.
83 Two South Orange Plaza
84 City: Orlando FL 85 Zip Code: 32802

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 in Section 607.0505, Florida Statutes.

SIGNATURE: [Signature] DATE: 4/23/97

12. OFFICERS AND DIRECTORS
TITLE: DC
NAME: DOEBLER, DONALD W.
STREET ADDRESS: 3033 MERCY DR ORLANDO FL
CITY-ST-ZIP: ORLANDO FL
[X] DELETE
TITLE: V
NAME: DENSON, BRIAN H
STREET ADDRESS: 3033 MERCY DR ORLANDO FL
CITY-ST-ZIP: ORLANDO FL
[X] DELETE
TITLE: DVST
NAME: EDGAR, CANDICE B.
STREET ADDRESS: 3033 MERCY DRIVE ORLANDO FL
CITY-ST-ZIP: ORLANDO FL
[] DELETE
TITLE: PD
NAME: DOEBLER, DAVID R
STREET ADDRESS: 3033 MERCY DR. ORLANDO FL
CITY-ST-ZIP: ORLANDO FL
[] DELETE
TITLE: DV
NAME: ECELBARGER, CRAIG V
STREET ADDRESS: 3033 MERCY DR. ORLANDO FL
CITY-ST-ZIP: ORLANDO FL
[X] DELETE
TITLE: V
NAME: CZECH, DONALD R
STREET ADDRESS: 3033 MERCY DR. ORLANDO FL
CITY-ST-ZIP: ORLANDO FL
[X] DELETE

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 [] Change [] Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE: VTS [X] Change [] Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP: Orlando, FL. 32808
4.1 TITLE [X] Change [] Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP: Orlando, FL. 32808
5.1 TITLE [] Change [] Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE [] Change [] Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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: [Signature] Candice B. Edgar 4-16-97 (407) 297-0141
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)