

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90079 001 ****61.25

DOCUMENT # N00000001052

1. Entity Name
**THE GREAT OUTDOORS PREMIER R.V./GOLF RESORT
XVI CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business
**145 PLANTATION DR.
TITUSVILLE, FL 32780**

Mailing Address
**145 PLANTATION DR.
TITUSVILLE, FL 32780**

40024000



02062007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3638189	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**CHESNUT, MATHEW
100-D PLANTATION DR
TITUSVILLE, FL 32780**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP HARVEY, ALEXANDER 145 PLANTATION DR. TITUSVILLE, FL 32780
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP FISK, DONALD 145 PLANTATION DR TITUSVILLE, FL 32780
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST QUINN, KAREN 145 PLANTATION DR. TITUSVILLE, FL 32780
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Alexander Harvey Alexander Harvey 2/20/07 321-268-9767
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #