

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 13, 2006 8:00 am**  
**Secretary of State**

04-13-2006 90294 047 \*\*\*\*61.25

**DOCUMENT # N05002**

1. Entity Name  
**BIG "O" RV PARK ASSOCIATION, INC.**



Principal Place of Business  
**7950 SW HWY 78  
OKEECHOBEE, FL 34974**

Mailing Address  
**P.O. BOX 5489  
SALT SPRINGS, FL 32134**

**60028378**



2. Principal Place of Business

3. Mailing Address

**7950 SW HWY 78**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04102006 Chg-NP CR2E037 (11/05)

City & State

City & State  
**Okeechobee, FL**

4. FEI Number  
**65-0440093**

Applied For  
Not Applicable

Zip

Country

Zip

Country

**34974 Okeechobee**

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**MACKAY, DAVID L  
2801 SW COLLEGE RD.  
SUITE 1  
OCALA, FL 34474**

7. Name and Address of New Registered Agent

Name **Effie Hethling**  
Street Address (P.O. Box Number is Not Acceptable)  
**7950 SW Highway 78 #191**  
City **Okeechobee** FL Zip Code **34974**

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 **Effie S. Hethling, Manager**  
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**4/10/06**  
DATE

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **S** ☒ Delete  
NAME **SMITH, GARRY**  
STREET ADDRESS **7950 W HIGHWAY 78**  
CITY-ST-ZIP **OKEECHOBEE, FL 34974**

TITLE **P** ☒ Delete  
NAME **TOLAN, BRIAN**  
STREET ADDRESS **14100 N HIGHWAY 19**  
CITY-ST-ZIP **SALT SPRINGS, FL 32134**

TITLE **VP** ☒ Delete  
NAME **HETLING, RONALD**  
STREET ADDRESS **7950 W HIGHWAY 78**  
CITY-ST-ZIP **OKEECHOBEE, FL 34974**

TITLE **T** ☒ Delete  
NAME **JONES, GLENDA**  
STREET ADDRESS **14100 N HIGHWAY 19**  
CITY-ST-ZIP **SALT SPRINGS, FL 32134**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Change ☐ Addition  
NAME **KEN CAMPBELL**  
STREET ADDRESS **7950 SW HWY 78 #46**  
CITY-ST-ZIP **Okeechobee, FL 34974**

TITLE **VP** ☐ Change ☐ Addition  
NAME **KEN BASWELL**  
STREET ADDRESS **7950 SW HWY 78 #73**  
CITY-ST-ZIP **Okeechobee, FL 34974**

TITLE **S** ☐ Change ☐ Addition  
NAME **BETTY J GAULE**  
STREET ADDRESS **7950 SW HWY 78 #174**  
CITY-ST-ZIP **Okeechobee, FL 34974**

TITLE **T** ☐ Change ☐ Addition  
NAME **DENVER STEPHENS**  
STREET ADDRESS **7950 SW HWY 78 #261**  
CITY-ST-ZIP **Okeechobee, FL 34974**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: **Betty J Gaule** **Betty J Gaule Secretary** **4-10-2006 239-980-1485**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #