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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # N33768

(5)

THE GREAT OUTDOORS PREMIER R.V./GOLF RESORT COMM UNITY SERVICES ASSOCIATION, INC.

UNITY SERVICES ASSOCIATION, INC. Principal Place of Business C/O JAMES W. PEEPLES. III 505 NORTH ORLANDO AVENUE. P.O. BOX 320757 COCOA BEACH FL 32831 2. Mailing Address C/O JAMES W. PEEPLES. III 505 NORTH ORLANDO AVENUE. P.O. BOX 320757 COCOA BEACH FL 32831 3. Date Incorporated or Qualified O8/17/1989 08/17/1989 08/17/1989 08/17/1989 08/17/1989 08/17/1989 08/17/1989 08/17/1989 08/17/1989 08/17/1989 08/17/1989 08/17/1989 08/17/1989 10/12/1995 2. Principal Place of Business 2. Mailing Address 2. Mailing Address 4. FEI Number 59-2964957 Not Applied F 59-2964957 Not Applied F 59-2964957 Not Applied F 59-2964957 Not Applied F 59-2964957 Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State 2. Country 2. Principal Place of Business 2. City & State 10. Name and Address of New Registered Agent 11. Name PEEPLES, JAMES W. III 505 NORTH ORLANDO AVENUE COCOA BEACH FL 32932 81 Name 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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
Sof NORTH ORLANDO AVENUE. P.O. BOX 320757 COCOA BEACH FL 32931 Sof NORTH ORLANDO AVENUE. P.O. BOX 320757 COCOA BEACH FL 32931 Sof NORTH ORLANDO AVENUE. P.O. BOX 320757 COCOA BEACH FL 32931 3. Date Incorporated or Qualified 08/17/1989 4. FEI Number Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Zip Country Zip Country Zip Country Sof North Orlando Avenue 9. Name and Address of Current Registered Agent Name PEEPLES, JAMES W. III Sof NORTH ORLANDO AVENUE COCOA BEACH FL 32932 B4 City FL 85 Zip Code 13. Date Incorporated or Qualified 08/17/1989 04/12/1995 3a. Date of Last Report 04/12/1995 Sp. Paper Address Sp. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Zip Code 44 City FL 85 Zip Code
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered
SIGNATURE Signature typied or printed name of registered agent and title if accordable INOTE Registered Agent signature required when reinstating DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/95

Daytime Phone #