


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90010 021 ****61.25

DOCUMENT # N33772 1. Entity Name THE GREAT OUTDOORS PREMIER R.V./GOLF RESORT I CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 145 PLANTATION DR TITUSVILLE, FL 32780 US	Mailing Address 145 PLANTATION DR TITUSVILLE, FL 32780 US
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40046556



2. Principal Place of Business - No P.O. Box #	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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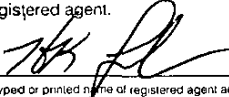
Zip	Country	Zip	Country
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02212008 Chg-NP CR2E037 (12/06)

4. FEI Number 59-2964958	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CHESNUT, MATTHEW 100-D PLANTATION DR. TITUSVILLE, FL 32780	7. Name and Address of New Registered Agent Name LAMB, HIRAM KEITH Street Address (P.O. Box Number is Not Acceptable) 100-D PLANTATION DRIVE City TITUSVILLE FL Zip Code 32780
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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 	Hiram Keith Lamb 3/4/08 DATE


**Filing Fee is \$61.25.
Due by May 1, 2008.**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MURPHY, LORRAINE <input type="checkbox"/> Delete 145 PLANTATION DRIVE TITUSVILLE, FL 32780	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST NEVIN, PAULETTE <input type="checkbox"/> Delete 145 PLANTATION DR TITUSVILLE, FL 32780	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP BUDZIL, PATRICIA M <input type="checkbox"/> Delete 145 PLANTATION DR TITUSVILLE, FL 32780	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: 	President 3-4-08 Lorraine Murphy	321-268-9267 Daytime Phone #
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