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CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 12 PM 12:13

DOCUMENT # **N93000000554 (6)**

1. Corporation Name

THE GREAT OUTDOORS PREMIER R.V./GOLF RESORT V CO NDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4505 WEST CHENEY HWY. TITUSVILLE FL 32780	4505 WEST CHENEY HWY. TITUSVILLE FL 32780

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/09/1993
3a. Date of Last Report: 02/22/1994
4. FEI Number: ~~APPLIED FOR~~ 59-3232356 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 135 PLANTATION DR.	26 (SAME)
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 Titusville, FL.	28 City & State
24 32780 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

PEEPLES, JAMES W III
505 NORTH ORLANDO AVE.
COCOA BEACH FL 32932-0757

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	11 TITLE	☑ Change ☐ Addition
NAME	PERRY, ARTHUR	12 NAME	
STREET ADDRESS	4505 CHENEY HWY	13 STREET ADDRESS	135 PLANTATION DR.
CITY-ST-ZIP	TITUSVILLE FL	14 CITY-ST-ZIP	Titusville, FL. 32780
TITLE	DV	21 TITLE	☑ Change ☐ Addition
NAME	CUMMING, LORI	22 NAME	
STREET ADDRESS	4505 WEST CHENEY HWY	23 STREET ADDRESS	135 PLANTATION DR.
CITY-ST-ZIP	TITUSVILLE FL	24 CITY-ST-ZIP	TITUSVILLE, FL. 32780
TITLE	DTS	31 TITLE	DIRECTOR ☑ Change ☐ Addition
NAME	WEINSTEIN, BARRY	32 NAME	KEN VANDERBROEK
STREET ADDRESS	4505 WEST CHENEY HWY	33 STREET ADDRESS	135 PLANTATION DR.
CITY-ST-ZIP	TITUSVILLE FL	34 CITY-ST-ZIP	Titusville, FL. 32780
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 hereof, or on an attachment with an address.

SIGNATURE: Arthur V. Perry

SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OFFICER OR DIRECTOR — Date — Daytime Phone #

0032/02