

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N94000005964**

1. Entity Name

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

Principal Place of Business

**145 PLANTATION DR
TITUSVILLE FL 32780
US**

Mailing Address

**145 PLANTATION DR
TITUSVILLE FL 32780
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3361216

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**EVANS, JOHN H
1702 S WASHINGTON AVE
TITUSVILLE FL 32780**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees****Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**DP
KNOX, ROBERT
145 PLANTATION DR
TITUSVILLE FL 32780**☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**DV
HAY, FRANK
135 PLANTATION DRIVE
TITUSVILLE FL**☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**DST
REDMOND, TRUDY
145 PLANTATION DR
TITUSVILLE FL 32780**☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**P
Andy Martenson -D
145 Plantation Dr
Titusville FL 32780**☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**VP
Bob Yetter -D
145 Plantation Dr
Titusville FL 32780**☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**ST
becky Siemens -D
145 Plantation Dr
Titusville FL 32780**☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**D
Bob Wilcox -D
145 Plantation Dr.
Titusville FL 32780**☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Bob Wilcox
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**FILED
Jun 17, 2002 8:00 am
Secretary of State**

05-20-2002 90176 001 ***306.25

93304



DO NOT WRITE IN THIS SPACE

CP2E037 (9/01)