

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2004 8:00 am
Secretary of State

04-07-2004 90014 034 ****61.25

DOCUMENT # N94000005964

1. Entity Name
**THE GREAT OUTDOORS PREMIER R.V./GOLF RESORT
X CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business
**145 PLANTATION DR
TITUSVILLE, FL 32780 US**

Mailing Address
**145 PLANTATION DR
TITUSVILLE, FL 32780 US**

94046117



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02192004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-3361216

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name **Robert m. Wilcox**

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

100-D Plantation Drive

City **Titusville**

FL

Zip Code
32780

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

Robert m. Wilcox

Robert m. Wilcox

4-204

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

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 **DVP** ☐ Delete
NAME **MILLER, ROGER**
STREET ADDRESS **145 PLANTATION DR**
CITY-ST-ZIP **TITUSVILLE, FL 32780**

TITLE **DS** ☒ Delete
NAME **SHODA, AL**
STREET ADDRESS **145 PLANTATION DR.**
CITY-ST-ZIP **TITUSVILLE, FL 32780**

TITLE **D** ☐ Delete
NAME **CLUTTERHAM, DAVID**
STREET ADDRESS **145 PLANTATION DR**
CITY-ST-ZIP **TITUSVILLE, FL 32780**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 **DP** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DVP** ☐ Change ☒ Addition
NAME **Jerry Spero**
STREET ADDRESS **145 Plantation Drive**
CITY-ST-ZIP **Titusville FL 32780**

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

TITLE **DST** ☐ Change ☒ Addition
NAME **Helen Yeager**
STREET ADDRESS **145 Plantation Drive**
CITY-ST-ZIP **Titusville FL 32780**

TITLE **D** ☐ Change ☒ Addition
NAME **Shirley Bosch**
STREET ADDRESS **145 Plantation Drive**
CITY-ST-ZIP **Titusville FL 32780**

TITLE **D** ☐ Change ☒ Addition
NAME **Robert Enstam**
STREET ADDRESS **145 Plantation Drive**
CITY-ST-ZIP **Titusville FL 32780**

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: *Roger Miller*

Roger Miller

4-204

321-268-9767

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #