2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N9700006024

1. Entity Name



Apr 15, 2003 8:00 am § Secretary of State 04-15-2003 90113 009 ****61.25

THE GREAT OUTDOORS PRECONDOMINIUM ASSOCIATION	NE TO		
Principal Place of Business	Mailing Address		
135 PLANTATION DR. TITUSVILLE FL 32780	135 Plantation dr. Titusville fl 32780		
2. Principal Place of Business	3. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		

Principal Place of Business 135 PLANTATION DR. TITUSVILLE FL 32780 Mailing Address 135 PLANTATION DR. TITUSVILLE FL 32780											
2. Principal Place of Business 3. Mailing			iling Address	ng Address							
Suite, Apt. #, etc.			Si	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number 5	9-3485158		oplied For			
Zip		Country	Zi	р	Country		5. Certificate of Sta	itus Desired	\$8.75 44	ditional	
	6. Name	and Address of Curren	t Register	ed Agent			7. Name and Addr	ess of New Registe	ered Agent		
1702 S	JOHN H. Washingto LLE FL 3278				Street		(P.O. Box Number is N	ot Acceptable)			
•					City				FL Zip Cod	e	
	tions of registe	submits this statement red agent.			FE Registered Agent sign				i am tamilitar With,	and accept	
	FILE NOW:	FEE IS \$61.25		9. Election Car Trust Fund C	mpaign Financing Contribution.		\$5.00 May Be Added to Fees		heck Payable partment of \$		
10.	COT	OFFICERS AND D	RECTORS		11.		ADDITIONS/CHANGE	S TO OFFICERS AN	D DIRECTORS IN		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DAN <i>TATION DRIVE</i> EFL 32780		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	145	d Leiser Plantation usuille PL	Dr. 32780	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WAGNER, 145 PLANT TITUSVILLI	ATION DRIVE		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP	Soars Plantation	Dr. 32780	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD VENTURA,	JOHN TATION DR		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		ence Scars Plantation D usville FL	r. 32780	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		•		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY ST. 7/B				☐ Delete	TITLE NAME STREET ADDRESS				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 a other like empowered.

321-264-5925