


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2006 8:00 am
Secretary of State

02-15-2006 90027 005 ****61.25

DOCUMENT # N97000006832					
1. Entity Name RESORT RV PARK OWNERS' ASSOCIATION, INC.					
Principal Place of Business 108-109 W BRADLEY ST DESTIN, FL 32550			Mailing Address 109 W BRADLEY STREET #32 DESTIN, FL 32550		
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 59-3508600	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VAUGHN, JIM 108 W BRADLEY ST #12 DESTIN, FL 32550			7. Name and Address of New Registered Agent Name: <u>White, Teri</u> Street Address (P.O. Box Number is Not Acceptable): <u>108 W. Bradley #3</u> City: <u>Destin</u> <u>FL</u> Zip Code: <u>32550</u>		
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 _____ (NOTE: Registered Agent signature required when reappointing)					
Filing Fee is: \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE PD	NAME VAUGHN, JIM	<input checked="" type="checkbox"/> Delete	TITLE SD	NAME White, Teri	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 108 W BRADLEY ST #12	STREET ADDRESS 108.W. Bradley #3				
CITY-ST-ZIP DESTIN, FL 32550	CITY-ST-ZIP Destin, FL 32550				
TITLE VD	NAME JOHNSON, JAMES	<input type="checkbox"/> Delete	TITLE VP	NAME Seiter, Don	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 108 W BRADLEY ST #5	STREET ADDRESS 108 W. Bradley #15				
CITY-ST-ZIP DESTIN, FL 32550	CITY-ST-ZIP Destin, FL 32550				
TITLE TD	NAME HALL, BOB	<input type="checkbox"/> Delete	TITLE TD	NAME Vincent, Jeanne A.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 109 W BRADLEY STREET #25	STREET ADDRESS 108 W. Bradley #16				
CITY-ST-ZIP DESTIN, FL 32550	CITY-ST-ZIP Destin, FL 32550				
TITLE 	NAME 	<input type="checkbox"/> Delete	TITLE PD	NAME Hall, Bob	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 	STREET ADDRESS 109 W. Bradley #25				
CITY-ST-ZIP 	CITY-ST-ZIP Destin, FL 32550				
TITLE 	NAME 	<input type="checkbox"/> Delete	TITLE 	NAME 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 	STREET ADDRESS 				
CITY-ST-ZIP 	CITY-ST-ZIP 				
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: <u>Teri White</u>			<u>January 27, 2006</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		