

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90096 017 ***150.00

DOCUMENT # P00000085503

1. Entity Name
RV PARK MARKETING CONSULTANTS, INC.

Principal Place of Business

12734 KENWOOD LANE
SUITE 84
FORT MYERS FL 33907

Mailing Address

12734 KENWOOD LANE
SUITE 84
FORT MYERS FL 33907

2. Principal Place of Business

14360 S. TAMiami TR

Suite, Apt. #, etc.

STE B

City & State

FORT MYERS FL

Zip

33912

Country

USA

3. Mailing Address

P.O. Box 07128

Suite, Apt. #, etc.

City & State

FORT MYERS FL

Zip

33919

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1039545

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DODRILL, DAVID E

12734 KENWOOD LANE

SUITE 84

FORT MYERS FL 33907

7. Name and Address of New Registered Agent

Name

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

14360 S. TAMiami TR

City

FORT MYERS

FL

Zip Code

33919

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

David E. Dodrill

David E. Dodrill

4/28/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)



FILE NOW!!! FEE IS \$150.00

After May 1, 2002 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing

Trust Fund Contribution.



\$5.00 May Be

Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **DODRILL, DAVID E**
STREET ADDRESS **929 ADELPHI COURT**
CITY-ST-ZIP **FORT MYERS FL 33919**

TITLE **VP** ☐ Delete
NAME **DODRILL, CATHRON S**
STREET ADDRESS **929 ADELPHI COURT**
CITY-ST-ZIP **FORT MYERS FL 33919**

TITLE **S** ☐ Delete
NAME **KOEHLER, TAMMY T**
STREET ADDRESS **12734 KENWOOD LANE #B4**
CITY-ST-ZIP **FORT MYERS FL 33907**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1142 SW 28TH STREET**
CITY-ST-ZIP **CAPE CORAL FL 33914**

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

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

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

David E. Dodrill

David E. Dodrill

4/28/02

941-931-4502

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)