


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90456 021 ***158.75

DOCUMENT # P00000086823 1. Entity Name MANATEE SPRINGS COUNTRY STORE AND R.V. CAMPGROUND, INC.					
Principal Place of Business 12190 NW 110TH AVE. CHIEFLAND, FL 32626			Mailing Address P.O. BOX 46 CEDAR KEY, FL 32625		
2. Principal Place of Business 11490 NW 115th ST			3. Mailing Address 11490 NW 115th ST		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State Chiefland, FL		City & State Chiefland, FL		4. FEI Number 59-3639891	
Zip 32626		Country U.S.A		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CAUSEY, KATHRYN F 12421 SR 24 CEDAR KEY, FL 32625			7. Name and Address of New Registered Agent Name Edward R. Eubank Street Address (P.O. Box Number is Not Acceptable) 12190 NW 110th AVE. City Chiefland FL Zip Code 32626		
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 <u>Edward R. Eubank</u> Edward R. Eubank (Pres.) 4/29/04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>					
FILE NOW!!! - FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EUBANK, EDWARD R 12190 NW 110TH AV. CHIEFLAND, FL 326264664	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Edward R. Eubank 12190 NW 110 th AVE Chiefland, FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD EUBANK, SUSAN P 12190 NW 110TH AVE. CHIEFLAND, FL 326264664	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CAUSEY, KATHRYN F 12421 SR 24 CEDAR KEY, FL 32625	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 607, 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>Edward R. Eubank</u> PDT. Edward R. Eubank 4/29/04 352-493-0422 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					