

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000004012

**Entity Name:** SISTERS R.V. RESORT, INC.

**FILED**  
**Apr 07, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

3201 SE 34TH AVE  
OKEECHOBEE, FL 34974

**New Principal Place of Business:**

3201 SE 34TH AVE  
OKEECHOBEE, FL 34974 UN

**Current Mailing Address:**

3201 SE 34TH AVE  
OKEECHOBEE, FL 34974

**New Mailing Address:**

**FEI Number:** 80-0019096

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KREITMAN, ALAN  
1417 ALPHA COURT  
WEST PALM BEACH, FL 33406 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: KREITMAN, ALAN  
Address: 1417 ALPHA COURT  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D  
Name: CHEEVER, JAMES  
Address: 1420 PALM CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33406

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JAMES CHEEVER

D

04/07/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date