

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000120177

Entity Name: WALDO RV PROPERTY, INC.

FILED
Feb 06, 2008
Secretary of State

Current Principal Place of Business:

17254 NE US HWY 301
WALDO, FL 32694

New Principal Place of Business:

17254 NE US HWY 301
WALDO, FL

Current Mailing Address:

17254 NE US HWY 301
WALDO, FL 32694

New Mailing Address:

2950 N SPARKMAN AVE
ORANGE CITY, FL

FEI Number: 20-5608752

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLIFTON, JAMES O
17254 NE US HWY 301
WALDO, FL 32694 US

Name and Address of New Registered Agent:

CLIFTON, JAMES O
2950 N SPARKMAN AVE
ORANGE CITY, FL US

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: JAMES O CLIFTON

02/06/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CLIFTON, JAMES O
Address: 2950 N SPARKMAN AVE
City-St-Zip: ORANGE CITY, FL 32763

Title: D () Delete
Name: CLIFTON, ALICE
Address: 2950 N SPARKMAN AVE
City-St-Zip: ORANGE CITY, FL 32763

Title: D () Delete
Name: BOUNDS, J. CLANCY
Address: 3812 LAKE SARAH DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: BOUNDS, CAROL ANN
Address: 4430 SE FORT KING STREET
City-St-Zip: OCALA, FL 34470

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CLIFTON, JAMES O
Address: 2950 N SPARKMAN AVE
City-St-Zip: ORANGE CITY, FL 32763

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TRES (X) Change () Addition
Name: BOUNDS, J. CLANCY
Address: 3812 LAKE SARAH DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: OHRI, GUYMIT KAUR
Address: 9220 HIDDEN BAY LN
City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JAMES O CLIFTON

PRES

02/06/2008

Electronic Signature of Signing Officer or Director

Date