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FILED
Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P21269 (6)
1. Corporation Name
OUTDOOR WORLD CORP. - ORLANDO RESORT



Principal Place of Business Mailing Address
ROUTE 209 ROUTE 209
BUSHKILL PA 18324 BUSHKILL PA 18324

3. Date Incorporated or Qualified 10/12/1988
3a. Date of Last Report 08/14/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	36-3582665	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	<input type="checkbox"/>	
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	28	<input type="checkbox"/>	
Zip	Country	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No
24	25	29	30

9. Name and Address of Current Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
STE. 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOWELLS, DANIEL P.	1.2 NAME	
STREET ADDRESS	RT 209	1.3 STREET ADDRESS	
CITY-ST-ZIP	BUSHKILL PA	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NORTH, TERENCE	2.2 NAME	
STREET ADDRESS	ONE AMBLESIDE, EPPING ESSEX	2.3 STREET ADDRESS	
CITY-ST-ZIP	ENGLAND CM	2.4 CITY-ST-ZIP	
TITLE	VPD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORSO, FRANK	3.2 NAME	
STREET ADDRESS	RD 5 BOX 5616	3.3 STREET ADDRESS	
CITY-ST-ZIP	E. STROUNDSBURG PA	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORGAN, BRUCE L.	4.2 NAME	
STREET ADDRESS	RD 2 BOX 2200	4.3 STREET ADDRESS	
CITY-ST-ZIP	MOSCOW PA	4.4 CITY-ST-ZIP	
TITLE	T	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DELANEY, THOMAS G.	5.2 NAME	
STREET ADDRESS	#4 FAIRFIELD	5.3 STREET ADDRESS	
CITY-ST-ZIP	AVONDALE ES GA	5.4 CITY-ST-ZIP	
TITLE	AS	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCNEESE, JACK L.	6.2 NAME	
STREET ADDRESS	4323 LAKE CHIMNEY CT.	6.3 STREET ADDRESS	
CITY-ST-ZIP	ROSWELL GA	6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: *Bruce L. Morgan* Bruce L. Morgan, Secretary 4/23/97 (717)588-6661

CR2E034 (9/96)