2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000009461

Entity Name: 21 PALMS RV RESORT, INC.

FILED Feb 18, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6951OSCEOLA POLK LINE RD
DAVENPORT, FL 33837 US
6951OSCEOLA POLK LINE RD
DAVENPORT, FL 33896 US

Current Mailing Address: New Mailing Address:

69510SCEOLA POLK LINE RD 69510SCEOLA POLK LINE RD DAVENPORT, FL 33837 US DAVENPORT, FL 33896 US

FEI Number: 65-0378825 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DYKGRAAF, NATHAN D SR
6951 OSCEOLA POLK LINE RD
DAVENPORT, FL 33837 US

DYKGRAAF, NATHAN D SR
6951 OSCEOLA POLK LINE RD
DAVENPORT, FL 33896 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: 02/18/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 DP
 () Delete

 Name:
 DYKCRAAF, NATHAN SR

 Address:
 6951 OSCEOLA POLK LINE RD

City-St-Zip: DAVENPORT, FL

 Title:
 DV
 () Delete

 Name:
 DYKGRAAF, NATHAND J

 Address:
 3325 BUTLER BAY DR NORTH

 City-St-Zip:
 WINDERMERE, FL 34786

Title: DT () Delete
Name: DYKGRAAF, MARTHA

Address: 6951 OSCEOLA POLK LINE RD

City-St-Zip: DAVENPORT, FL

Title: D () Delete
Name: DYKGRAAF, BRENDA
Address: 7550 HNSON ST
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DYKGRAAF, NATHAN SR
Address: 6951 OSCEOLA POLK LINE RD
City-St-Zip: DAVENPORT, FL 33896

Title: DV (X) Change () Addition

Name: DYKGRAAF, NATHAN D Address: 6521 CARTMELL DRIVE City-St-Zip: WINDERMERE, FL 34786

Title: DT (X) Change () Addition

Name: DYKGRAAF, MARTHA Address: 5416 BAYSIDE DRIVE City-St-Zip: ORLANDO, FL 32819

Title: D (X) Change () Addition

Name: DYKGRAAF, BRENDA Address: 9711 DECON COURT City-St-Zip: WINDEMERE, FL 34786

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: NATHAN DYKGRAAF SR PRES 02/18/2009