

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000038752

1. Entity Name
CAMPGROUNDS UNLIMITED, INC.

FILED
Mar 06, 2001 8:00 am
Secretary of State

03-06-2001 90326 002 ***150.00

Principal Place of Business

200 W WISCONSIN AVE
DELAND FL 32720
US

Mailing Address

P.O. BOX 2948
DELAND FL 32723
US

2. Principal Place of Business

3. Mailing Address

200 W. Wisconsin Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Deland, FL 32722

4. FEI Number

59-3197824

Applied For

Not Applicable

Zip

Country

Zip

Country

32720

Volusia

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COOK, EUGENE R
200 W WISCONSIN AVE
DELAND FL 32763

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	COOK, EUGENE R	
STREET ADDRESS	200 W WISCONSIN AVE	
CITY-ST-ZIP	DELAND FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	COOK, NORMA K	
STREET ADDRESS	200 W WISCONSIN AVE	
CITY-ST-ZIP	DELAND FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	FERRARA, GERARD J	
STREET ADDRESS	2865 WHITEHURST RD	
CITY-ST-ZIP	DELAND FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	LILLY, GEORGE	
STREET ADDRESS	1425 OAK HIGH COURT	
CITY-ST-ZIP	ORANGE CITY FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Eugene Cook
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/2001 828-693-4018
Date Daytime Phone #

CR2E034 (10/00)