

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000059006 (5)

1. Corporation Name

RECREATIONAL FACTORY WAREHOUSE OF PINELLAS PARK,
INC.



Principal Place of Business

10820 US 19 N
CLEARWATER FL 34624
US

Mailing Address

3033 MERCY DRIVE
ORLANDO FL 32808
US

3. Date Incorporated or Qualified
08/23/1993

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

4. FEI Number

59-3200717

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes



No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EDGAR, CANDICE B
3033 MERCY DRIVE
ORLANDO FL 32808

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 then applicable

Signature, typed or printed name of new registered agent and then applicable

DATE

12. OFFICERS AND DIRECTORS

TITLE	CP	☐ DELETE
NAME	DOEBLER, DONALD W.	
STREET ADDRESS	3033 MERCY DRIVE	
CITY-STATE-ZIP	ORLANDO FL	
TITLE	V	☐ DELETE
NAME	CZECH, DONALD R	
STREET ADDRESS	3033 MERCY DRIVE	
CITY-STATE-ZIP	ORLANDO FL	
TITLE	VST	☐ DELETE
NAME	EDGAR, CANDICE B	
STREET ADDRESS	3033 MERCY DRIVE	
CITY-STATE-ZIP	ORLANDO FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	DC	☒ Change ☐ Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-STATE-ZIP		
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-STATE-ZIP		
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-STATE-ZIP		
41 TITLE	P	☐ Change ☒ Addition
42 NAME	Doebler, David R.	
43 STREET ADDRESS	3033 Mercy Dr.	
44 CITY-STATE-ZIP	Orlando, FL 32808	
51 TITLE	VB	☐ Change ☒ Addition
52 NAME	Denson, Brian H.	
53 STREET ADDRESS	3033 Mercy Dr.	
54 CITY-STATE-ZIP	Orlando, FL 32808	
61 TITLE	VB	☐ Change ☒ Addition
62 NAME	Ecelburger, Craig V.	
63 STREET ADDRESS	3033 Mercy Dr.	
64 CITY-STATE-ZIP	Orlando, FL 32808	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Candice B. Edgar

5/15/96 (407) 277-0141

Date

Daytime Phone

ext. 3360

CR2E034 (12/95)