4-21-95 B- 9079 C

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 21 PM 2:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000088861 (8)**

1. Corporation Name
CYPRESS CREEK CAMPGROUND, INC.

Principal Place of Business	Mailing Address
25135 CAMPGROUND RD LAND O'LAKES FL 34639 US	9908 CHRIS CRAFT CT TAMPA FL 33615 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/20/1993
3a. Date of Last Report: 04/29/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26: 9908 CHRIS CRAFT CT.
4. FEI Number: 59-3224197 ☐ Applied For ☐ Not Applicable

Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

City & State — 23
City & State — 28: TAMPA FL.
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Zip — 24 / Country — 25
Zip — 29: 33615 / Country — 30: USA
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

DUATO, ROBERT S
10631 BARDES CT
LARGO FL 34647

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 9908 CHRIS CRAFT CT.
83
84 City: TAMPA FL 85 Zip Code: 33615

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: Robert S. Duato ROBERT S. DUATO 4-15-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when mandatory) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	☒ Change	☐ Addition
NAME	DUATO, ROBERT S	12 NAME		
STREET ADDRESS	10631 BARDES CT	13 STREET ADDRESS	9908 CHRIS CRAFT CT.	
CITY-ST-ZIP	LARGO FL 34647	14 CITY-ST-ZIP	TAMPA, FL. 33615	
TITLE	STD	21 TITLE	☒ Change	☐ Addition
NAME	DUATO, PATSY F	22 NAME		
STREET ADDRESS	10631 BARDES CT	23 STREET ADDRESS	9908 CHRIS CRAFT CT.	
CITY-ST-ZIP	LARGO FL 34647	24 CITY-ST-ZIP	TAMPA, FL. 33615	
TITLE		31 TITLE	☐ Change	☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE	☐ Change	☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE	☐ Change	☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE	☐ Change	☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

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)(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: Robert S. Duato ROBERT S. DUATO 4-15-95 813 855-4772
SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER OFFICER OR DIRECTOR — Date — Daytime Phone #

0443228 FP