FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

APPROVED AND FILED

95 MAY -1 AM 8:41

DOCUMENT # P94000010915 (4)

1. LEISURE BAY FACTORY OUTLET, INC.

Principal Office Address
6333 N. ORANGE BLOSSOM TRAIL
SUITE 201
ORLANDO FL 32810

Mailing Address
6333 N. ORANGE BLOSSOM TRAIL
SUITE 201
ORLANDO FL 32810

3. Date Incorporated (or Qualified): 02/09/1994
3a. Date of Last Report:

2. Principal Place of Business
21 6325 N. Orange Blossom Tr.
22
23 Orlando, FL
24 32810 25 Orange

2a. Mailing Address
26 3033 Mercy Dr.
27
28 Orlando, FL
29 32808 30 Orange

4. FEI Number: 59-3219563
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

7. Does corporation consider itself a "small business" as defined in Florida Statutes: ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
EDGAR, CANDICE B
6333 N. ORANGE BLOSSOM TRAIL
SUITE 201
ORLANDO FL 32810

10. Name and Address of New Registered Agent
81 Name:
82 Street Address (P.O. Box Number is Not Acceptable): 3033 Mercy Dr.
83
84 City: Orlando FL 85 Zip Code: 32808

11. Pursuant to Section 607.0505 of the Florida Statutes, the undersigned corporation consents to the designation of the registered office and registered agent as set forth in this report and acknowledges that the corporation is familiar with and accepts the obligations of a registered agent under Section 607.0505 of the Florida Statutes.

12. OFFICERS AND DIRECTORS

D	DOEBLER, DONALD W 6333 N. ORANGE BLOSSOM TR., STE. 201 ORLANDO FL 32810
D	DOEBLER, DAVID R 6333 N. ORANGE BLOSSOM TR., STE. 201 ORLANDO FL 32810
D	EDGAR, CANDICE B 6333 N. ORANGE BLOSSOM TR., STE. 201 ORLANDO FL 32810
D	ECELBARGER, CRAIG V 3411 N.W. 72 AVE. MIAMI FL 33122

13. ADDITIONAL OFFICERS AND INFORMATION

C	3033 Mercy Dr. Orlando, FL 32808	☒ Add ☐ Amend
P	3033 Mercy Dr. Orlando, FL 32808	☒ Add ☐ Amend
VST	3033 Mercy Dr. Orlando, FL 32810	☒ Add ☐ Amend
V	3033 Mercy Dr. Orlando, FL 32808	☒ Add ☐ Amend
		☐ Add ☐ Amend
		☐ Add ☐ Amend

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same force and 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 Florida Statutes; and that my name appears above, or on an attachment with all other like empowered officers and directors.

SIGNATURE: 4-25-95 (407) 297-0441
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Candice B Edgar, Vice President

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