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 MAY -1 PM 8:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000056558 (7)**

1. Corporation Name
RECREATIONAL FACTORY WAREHOUSE OF TEXAS, INC.

Principal Place of Business	Mailing Address
6333 N. ORANGE BLOSSOM TRAIL SUITE 201 ORLANDO FL 32810	6333 N. ORANGE BLOSSOM TRAIL SUITE 201 ORLANDO FL 32810

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/29/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address	4. FEI Number: 59-3255173	☐ Applied For ☐ Not Applicable
21: 3033 Mercy Dr.	26: 3033 Mercy Dr.		
Suite, Apt. #, etc 22:	Suite, Apt. #, etc 27:	5. Certificate of Status Desired ☒	$8.75 Additional Fee Required
City & State 23: Orlando, FL	City & State 28: Orlando, FL	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip / Country 24: 32808 / 25: Orange	Zip / Country 29: 32808 / 30: Orange	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 6333 N. ORANGE BLOSSOM TRAIL SUITE 201 ORLANDO FL 32810	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 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: (Required if this statement is typed or printed.) (If changing Registered Agent, Registered Agent must sign.) DATE:

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	DC ☒ Change ☐ Addition
NAME	DOEBLER, DONALD W	12 NAME	
STREET ADDRESS	6333 N. ORANGE BLOSSOM TRAIL, STE. 201	13 STREET ADDRESS	3033 Mercy Dr.
CITY ST ZIP	ORLANDO FL 32810	14 CITY ST ZIP	Orlando, FL 32808
TITLE		21 TITLE	P ☐ Change ☒ Addition
NAME		22 NAME	Doebler, David R.
STREET ADDRESS		23 STREET ADDRESS	3033 Mercy Dr.
CITY ST ZIP		24 CITY ST ZIP	Orlando, FL 32808
TITLE		41 TITLE	V ☐ Change ☒ Addition
NAME		42 NAME	Ecelbarger, Craig V.
STREET ADDRESS		43 STREET ADDRESS	3033 Mercy Dr.
CITY ST ZIP		44 CITY ST ZIP	Orlando, FL 32808
TITLE		41 TITLE	VST ☐ Change ☒ Addition
NAME		42 NAME	Edgar, Candice B.
STREET ADDRESS		43 STREET ADDRESS	3033 Mercy Dr.
CITY ST ZIP		44 CITY ST ZIP	Orlando, FL 32808
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: VP 4-25-95 (407) 297-0241
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone Number
Candice B Edgar Vice President

0069182 CP