FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600002998 (8)

RECREATIONAL FACTORY WAREHOUSE OF GREENSBORO, IN C.

FILED Apr 24 1998 8:00am Secretary of State



Principal Place	no of Business	A4-1			(481)	
į.	ce of Business	Mailing Address				
2924-B HIGH GREENSBOR		3033 MERCY DR. ORLANDO FL 32810				
US CHECKSON TO ELECT				DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qua	alified	
				01/10/1996		
—	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
[21]		26		59-3352703	Not Applicable	
Suite, Apt #, etc.		Suite, Ap1. #, etc.	 		red \$8.75 Additional	
City & Sta	lo .	City & State			Fee Required	
23		28		6. Election Campaign Finan	70.00	
Zip	Country	Zip	Country	Trust Fund Contribution		
24	25	— · · · · · · · · · · · · · · · · · · ·	30	Personal Property Tax du	has paid the current year Intangible le June 30. Yes No	
	9. Name and Address of Cui			10. Name and Address of N		
MC	DSES, PAUL W H		81 Name			
	AGUIRE, VOORHIS & WELLS		82 Street Add	Jay Van Heyde	- contable)	
2 S ORANGE PLAZA			50 Street Add	82 Street Address (P.O. Box Number is Not Acceptable) Maguire, Voorhis & Wells, PA		
			1831			
j				200 South Orang	re Avenue, Suite 30	
			B4 City	Orlando	FL 85 Zip Code 32802	
11. Pursuant	to the provisions of Sections 607.	0502 and 607 1508, Florida Statute			or the purpose of changing its registered	
office or i	registered agent, or both, in the St am familiar with and accept the of	tate of Florida. Such change was a bliggtions of Section 607,0505. Flo	uthorized by the corpora	ition's board of directors. I hereby	or the purpose of changing its registered y accept the appointment as registered	
	Jay Van	Jugo Jay	Van Heydes	s. Esquire	4/10/148	
SIGNATURE	Signature, typed or printegraphs of registered	d agent and tille if applicable (NOTL	. Hegistered Agent signature requ	pred when reinstating)	DATE	
12.	OFFICERS	AND DIRECTORS	13.		OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	DOEBLER, DAVIO R		1.2 NAME		[·	
STREET ADDRESS	3033 MERCY DR.		1.3 STREET ADDRESS			
CITY - ST - ZIP	ORLANDO FL		1.4 CITY - ST - ZIP			
TITLE	VS	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	EDGAR, CANDICE B		2.2 NAME			
STREET ADDRESS	3033 MERCY DR		2.3 STREET ADDRESS			
CHY-ST-ZIP	ORLANDO FL		2 4 CITY-ST-ZIP		<u>;*</u>	
TITLE		☐ DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - ST - ZIP			
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - ST - ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME		j	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	61 TITLE		Change Addition	
NAME			62 NAME			
STREET ADDRESS			6 3 STREET ADDRESS			
CHTY-ST-ZIP			6.4 CITY-ST-ZIP			
	certify that the information supplied	d with this filing does not qualify for		Section 110 07/2V// Florida State	death to the second of the second	

indicated on this annual report or 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 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 equired by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or an artistach field with an address.

Sandice B. Edgar

Vice President

CICNATURE.

(407) 210-2260