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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 22 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600006656 (8)

R.V. ENTERPRISES, EAST COAST, INC.

11111	116111110	LOI LAGI GO	1011 IIIO.									
Principal Place of Business				Mailing Address					1 10 11 15 15 15 15 15 1	88311 88141 8 93	//B B///8 B//B/ B	TITLE MILES LANDE
1023 MANATEE AVENUE WEST				1023 MANATEE AVENUE WEST								
BRADENTON FL 34205			6	BRADENTON FL 34205				DO NOT WRI	TE IN THIS	SPACE		
									3. Date Incorporated or Qualified			
									01/22/1996	•		
2. Principal Place of Business				2a. Malling Address				- 1	4. FEI Number		1 /	Applied For
21				[26]					65-0658466		1	Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional	
22				27				b. Certificate of Status Desired		Fee F	beriupeF	
City & State				City & State			(6. Election Campaign Financing		,	🕽 Мау Ве	
23				28				Trust Fund Contribution			to Fees	
Zip	· — — ·			¬ '		Country		1	8. This corporation owes or has	•		ntangible
24	6 Name	25 and Address of C	29	etered Agent	30	1			Personal Property Tax due Ju 0. Name and Address of New I			☐ 140
114			unent nogic	nereu ryen	-	81	Name		U, Hallio Bila Addioss of flow i	1081210100	Agoin	
	WKINS, JO		,									
1023 MANATEE AVENUE WEST BRADENTON FL 34205			l	82			Street A	Address	(P.O. Box Number is Not Accept	able)		
) Dr.	MUCHION	FL 34203				83			<u></u>			-
											1 1:	
1						84	City			FL	85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,							e-named c	corporat	tion submits this statement for the	nurnose (of changing	its registered
office or r	regi ste red ag ım f am iliər w	gent, or both, in the l ith, and accept the i	State of Flori obligations o	da. Such change was if. Section 607.0505. F	s authori Florida S	ized by Statutes	/ the corp: i.	ioration's	s board of directors. I hereby acc	ept the ap	pointment a	s registered
1			5									
						Inred Age	ent signature r	required wt	nen reinslating)	DATE		
12.		OFFICERS	S AND DIRE	 		3.			ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE	D OFFICE YOUNG			☐ DELETE		1.1 TITLE					☐ Change	Addition
NAME		JOHN P				2 NAME						
STREET ADDRESS		AVENWOOD DR.			1		ADDRESS					
CITY-ST-ZIP	\$ARASI	JIA FL		DELETE		4 CITY-S 1 TITLE	T-ZIP				Change	Addition
TITLE	D	CANDDALV		Deterit							LJ Glange	Addition
NAME		, sandra k Avenwood dr.				2 NAME	*DDDCCC					
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP	SARASI D	VIA FL		DELETE		4 CITY - 9 1 TITLE	or-ZIP	·	<u>.</u>		Change	Addition
NAME		N, JOHN A				2 NAME						
STREET ADDRESS		ARL AVENUE					ADDRESS					
CITY-ST-ZIP	SARASI					4. CITY - S						
TITLE	Q/4/0101	DIKTE		DELETE		1 TITLE			 		☐ Change	Addition
NAME					4.	2 NAME	ļ				-	
STREET ADDRESS					4.	3 STREET	ADDRESS					
CITY-ST-ZIP						4 CITY - S						
TITLE	-			☐ DELE TE		1 TITLE					Change	Addition
NAME					5.	2 NAME						
STREET ADDRESS					5.	3 STREET	ADDRESS					
CITY-ST-ZIP					5.	4 CITY-S	T-ZIP					
TITLE				☐ DELETE	6.	1 TITLE					☐ Change	Addition
NAME					6.	2 NAME						
STREET ADDRESS					6.	3 STREET	ADDRESS					

14. I hereby certify that the information supplied with his filling 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 upon 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 crusted 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.