

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P97000055465**

1. Entity Name
COLBY-WOODS R.V. RESORT, INC.

FILED
Jan 10, 2002 8:00 am
Secretary of State

01-10-2002 90015 043 ***150.00

Principal Place of Business

**10313 EAST HIGHWAY 40
SILVER SPRINGS FL 34488**

Mailing Address

**10313 EAST HIGHWAY 40
SILVER SPRINGS FL 34488**

2. Principal Place of Business

Colby Woods

3. Mailing Address

Colby Woods

Suite, Apt. #, etc.

10313 E 40

Suite, Apt. #, etc.

10313 E 40

City & State

Silver Springs FL

City & State

Silver Springs FL

Zip

34488

Country

MARION

Zip

34488

Country

MARION



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3457688

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**FLANAGAN, GREGORY S
230 NORTHEAST 25TH AVENUE
SUITE 200
OCALA FL 34470**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Ken Shelley, President

KEN SHELLEY

1-8-02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

| | | |
|--|---|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D SHELLEY, KEN 10313 EAST HIGHWAY 40 SILVER SPRINGS FL 34488 | <input type="checkbox"/> Delete |
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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13. I hereby certify that the information 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 report or supplemental 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 and I am empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Ken Shelley, President

KEN SHELLEY

1-8-02 3526251122

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)