

DOCUMENT # P97000077469

1. Entity Name

OUTDOOR RESORTS OF NAPLES, INC.

Principal Place of Business

Mailing Address

2400 CRESTMOOR RD
SUITE 200
NASHVILLE TN 37215
US

2400 CRESTMOOR RD
SUITE 200
NASHVILLE TN 37215

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1011441

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Name

PRICE, R S
2640 GOLDEN GATE PARKWAY
SUITE 315
NAPLES FL 34105

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

FL Zip Code

7. Name and Address of New Registered Agent

City

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

(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, 2001 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

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME SCHOELLHORN, ROBERT A
STREET ADDRESS 2400 CRESTMOOR DRIVE
CITY-ST-ZIP NASHVILLE TX 37215

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change Addition

TITLE D
NAME HENDERSON, E R JR
STREET ADDRESS 2400 CRESTMOOR DRIVE
CITY-ST-ZIP NASHVILLE TX 37215

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change Addition

TITLE D
NAME GROSS, SHELDON J
STREET ADDRESS 2400 CRESTMOOR DRIVE
CITY-ST-ZIP NASHVILLE TX 37215

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change Addition

TITLE AS
NAME PETTY, RONALD W
STREET ADDRESS 2400 CRESTMOOR RD STE 200
CITY-ST-ZIP NASHVILLE TN 37215

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change Addition

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 or trustee 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: *Ronald W. Petty* Ronald W. Petty 01-05-01 615-244-5237

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)