

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

FILED  
Apr 01 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000080335 (7)**

1. Corporation Name  
**ELITE RESORTS AT BIG O, INC.**

Principal Place of Business  
**25250 E. HIGHWAY 316  
SALT SPRINGS FL 32134**

Mailing Address  
**P.O. BOX 5489  
SALT SPRINGS FL 32134**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>09/16/1997</b>	
21. Suite, Apt. #, etc.	22. City & State	26. Suite, Apt. #, etc.	27. City & State	4. FEI Number <b>59-3470719</b>	Applied For <input type="checkbox"/> Not Applicable
23. Zip	25. Country	28. Zip	30. Country	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
9. Name and Address of Current Registered Agent <b>WEST, BRADFORD D 215 N. EOLA DR. ORLANDO FL 32801</b>				10. Name and Address of New Registered Agent	
				81. Name <b>DAVID L. MACKAY</b>	
				82. Street Address (P.O. Box Number is Not Acceptable) <b>2801 SW College Rd, Suite 1</b>	
				83. City	
				84. City <b>Ocala</b>	85. Zip Code <b>34474</b>

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 607.0525, Florida Statutes.

SIGNATURE

*David L. Mackay*

(NOTE: Registered Agent signature required when reinstating)

DATE

**3/30/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	11. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MAYER, EDUARD</b>	12. NAME	
STREET ADDRESS	<b>25250 E. HIGHWAY 316</b>	13. STREET ADDRESS	
CITY-ST-ZIP	<b>SALT SPRINGS FL 32134</b>	14. CITY-ST-ZIP	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MACKAY, GEORGE L</b>	22. NAME	
STREET ADDRESS	<b>25250 E. HIGHWAY 316</b>	23. STREET ADDRESS	
CITY-ST-ZIP	<b>SALT SPRINGS FL 32134</b>	24. CITY-ST-ZIP	
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PATTON, JAMES H</b>	32. NAME	
STREET ADDRESS	<b>25250 E. HIGHWAY 316</b>	33. STREET ADDRESS	
CITY-ST-ZIP	<b>SALT SPRINGS FL 32134</b>	34. CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY-ST-ZIP		44. CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY-ST-ZIP		54. CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY-ST-ZIP		64. CITY-ST-ZIP	

14. 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 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:

*Sandra B. Mortham*

**3/30/98**

**409 444-2125**

CR2E034 (10/97)