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

PROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

Principal Place of Business	Mailing Address
4571 CLARK RD.	4571 CLARK RD.
SARASOTA FL 34233	SARASOTA FL 342

FILED Apr 30 1998 8:00am Secretary of State

	1998	DIVISION OF C	UNPURATIONS	
1. Corporatio	MENT # P9700 TURE RV, INC.	0095579 (3)		
Principal Plac	e of Business	Mailing Address		
4571 CLARK	RD.	4571 CLARK RD.		
SARASOTA F		SARASOTA FL 34233		DO NOT WEITE IN THE CRACE
				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
				11/07/1997
2. Principal P	face of Business	2a. Mailing Address		4. FEI Number Applied For
27 457	1 Clark Kd	20 4571 Cla	rk Bd	65-0793087 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	,	5. Certificate of Status Desired \$8.75 Additional
22		City & State		Fee Required
City & State 23 Source	sata Fl	20 Sarasota	EI.	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	This corporation owes or has paid the current year Intendible
ีผ 34a°	33 25 U.S.A.		30 V.S.A	Personal Property Tax due June 30. X Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered Agent
CO	LE, R. JOHN II		81 Name	Cole, R. John II
	N. WASHINGTON BLVD., STE.	24	82 Street A	Address (P.O. Box Number is Not Acceptable)
SA	rasota fl 34236			o N. Washington Blud, Stedy
			83	•
			84 City	FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607.05	02 and 607 1508. Florida Statutes	s, the above-named of	corporation submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the Slat	e of Florida. Such change was au	uthorized by the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
	TO MATINIAL WITH, BITO ACCOPT THE CON	gations or, obction our tools, mor	IOE O(BIOIOS.	
SIGNATURE	Signature, typed or printed name of registered as	pent and title if applicable (NOTE:	Registered Agent signature r	required when reinistating) DATE
12.	OFFICERS AF	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	President	DELETE	1.1 TITLE	Change Addition
NAME OTREET ADDRESS	Mill B. Jec	freu	1.2 NAME 1.3 STREET ADDRESS	
STREET ADDRESS CITY+ST-ZIP	4571 Clark R	4 242 33	1.4 CITY-ST-ZIP	
TITLE	Viae Presiden	DELETE	2.1 TITLE	Change Addition
NAME	Will W Kath		2.2 NAME	<u> </u>
STREET ADDRESS	4571 Clark Rd	nerine	2.3 STREET ADDRESS	
CITY-ST-ZIP	Sarasota FL	34233	2.4 CITY-ST-ZIP	
TITLE	,	DELETE	3.1 TITLE	☐ Change ☐ Addition
HAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP	Change Addition
TITLE NAME		C) otter	4.1 TITLE 4.2 NAME	L.J Change L.J Addition
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE	<u></u>	☐ DELETE	51 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY - ST - ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP	pertify that the information supplied	with this filing does not qualify for	the exemption stated	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information
	and the mountained odphood	who iming began not quality for	and one prior dialoc	- in addition to the factor a sound a service of the control and another service and a service and a service of the service of