

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000100849
 1. Entity Name
 D & J'S R.V. CENTER, INC.



Principal Place of Business Mailing Address
 101851 OVERSEAS HWY 101851 OVERSEAS HIGHWAY
 KEY LARGO, FL 33037 US KEY LARGO, FL 33037 US



01122005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
 65-0795875 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 WISEMAN, GARY R
 101851 OVERSEAS HWY.
 KEY LARGO, FL 33037

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I, 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

U00000183203
 01/19/05 00061 001 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	WISEMAN, GARY R
STREET ADDRESS	101851 OVERSEAS HWY.
CITY-ST-ZIP	KEY LARGO, FL 33037
TITLE	D
NAME	WISEMAN, LYNN A
STREET ADDRESS	101851 OVERSEAS HWY.
CITY-ST-ZIP	KEY LARGO, FL 33037
TITLE	D
NAME	WISEMAN, GARY R
STREET ADDRESS	102851 OVERSEAS HIGHWAY
CITY-ST-ZIP	KEY LARGO, FL 33037
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lynn Wiseman Lynn Wiseman Pres. Date: 1-14-05 Daytime Phone #: 305-451-2500