

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90009 017 ***150.00

DOCUMENT # P98000070664

1. Corporation Name

F & A CAMPGROUND MEMBERSHIPS, INC.

Principal Place of Business

20 N ORANGE AVE. SUITE 1000
ORLANDO FL 32801-4626

Mailing Address

20 N ORANGE AVE. SUITE 1000
ORLANDO FL 32801-4626

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/13/1998

2. Principal Place of Business

21 8700 Gulf Pines Drive

Suite, Apt. #, etc.

22

City & State

23 Milton, Florida

Zip

24 32583

25

USA

2a. Mailing Address

26 433 E. Thompson Blvd.

Suite, Apt. #, etc.

27

City & State

28 Ventura, California

Zip

29 93001-2728

30

USA

4. FEI Number

59-3532903

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax.

Yes

No

9. Name and Address of Current Registered Agent

JONES, BRIAN M
20 N ORANGE AVE, SUITE 1000
ORLANDO FL 32801-4626

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	P/D ☐ Change ☒ Addition
NAME		1.2 NAME	Richard L. Fausset, Jr.
STREET ADDRESS		1.3 STREET ADDRESS	433 E. Thompson Blvd.
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Ventura, CA 93001-2728
TITLE	☐ DELETE	2.1 TITLE	S/D ☐ Change ☒ Addition
NAME		2.2 NAME	Richard L. Fausset
STREET ADDRESS		2.3 STREET ADDRESS	433 E. Thompson Blvd.
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Ventura, CA 93001-2728
TITLE	☐ DELETE	3.1 TITLE	T/D ☐ Change ☒ Addition
NAME		3.2 NAME	Jack E. Neely
STREET ADDRESS		3.3 STREET ADDRESS	433 E. Thompson Blvd.
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Ventura, CA 93001-2728
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 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		6.4 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, with all other like empowered.

SIGNATURE:

Richard L. Fausset, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard L. Fausset, Jr. 4/28/99 (805)643-9358

Date

Daytime Phone #

Ext. 13

0089492

CR2E034 (1/98)