## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

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DOCUI		# 52804	<b>O</b>	(U)								
Corporation     DAVE		ESTATES ASSOCIAT	ΓΙΟN	, INC.								
Dringing! Diago	of Dunings			oiling Address						IAN AMI DIDIN DI		
Principal Place LOT 195 D	AVENPORT F		IVI	ailing Address LOT 195 DAVENPORT	RV RESO	RT						
2900 POWERLINE RD.		2900 POWERLINE RD.	2900 POWERLINE RD.									
HAINES CI	TY FL 33844			HAINES CITY FL 3384	•				3. Date Incorporated or Qualified	3a. Date		
									01/28/1991		3/28/19	995
2. Principal Pla	ace of Busin	ess	2a.	. Mailing Address					4. FEI Number 59-3056917			Applied For Not Applicable
Suite, Apt.	#, etc.	··	201	Suite, Apt. #, etc.								Additional
22			27	, 				•••	5. Certificate of Status Desired		* *	Required
City & State	9			City & State					Election Campaign Financing     Trust Fund Contribution			May Be
Zip		Country	28	Zip	Cour	ntry			8. This corporation has liability for	intangible ta		d to Fees 199.032.
24		25	29		30				Florida Statutes	No No		,
	9, Name	and Address of Current	Regis	itered Agent		81	Maron		10. Name and Address of New F	egistered /	gent	
ANTIO	NORE, CH	ARI FS .I				81	Name					
		PORT RV RESORT				82	Street A	Addres	s (P.O. Box Number is Not Acceptat	ile)		
	POWERLIN					83						-
HAINE	S CITY FL	33844				84	City				85 Zig	p Code
44.6					لـــــــــــــــــــــــــــــــــــــ					<u>FL</u>		
or register	red agent, or	both, in the State of Florida to the obligations of, Section	a. Suci	h change was authorize	s, the abo d by the c	ve-n :orpc	ration's	rporat board	ion submits this statement for the pur of directors. I hereby accept the app	pose of cha pintment as	nging its r registered	egistered office Lagent, Lam
SIGNATURE	m, and acce	pt the obligations or, section	n our.	.0505, Florida Statutes.								
	Signature, typed	or printed name of registered agent a				Agent	t signature re	quired v	hen reinstating)	DATE		
12.	PO	OFFICERS AND	DIREC	DELETE DELETE	13.	T+ C		ø	ADDITIONS/CHANGES TO OFF			
TITLE NAME		ILES, WALTER H.		E) beerie	1.2 NA			7	ROUT, Robert E 100 Power Line Ad 100 Power Line Ad 100 Power Line A 100 Power Line A 100 Power Line A		_ Change	Aconion
STREET ADDRESS	2900	POWERLINE RD #196					ADDRESS	29	00 POWEr Line All	3		
CITY-ST-ZIP	HAINE	S CMY FL			1.4 CI		T-ZIP	H	Aines City FL .	3384	4	
TITLE	D			DELETE	2. 1 TI	TLE		DT			] Change	Addition
NAME		MERY, ARTHUR		, ,	22 NA	ME		M	ORSCH, CATHER	ME Y	<u>.</u> _	
STREET ADDRESS		POWERLINE RD #124			2.3 ST	RÉET.	ADDRESS	2	goo, PowerLine A	d # 18	35	,
CITY-ST-ZIP	SD	ES CITY FL		FI DE ETE	2.4 CI		1 - ZIP	_£	tAines City FL	ري	847	
TITLE	1	LOW, WILLIAM		DELETE	3. 1 TI				J	L	] Change	Addition
NAME		POWERLINE RD #21A			3.2 NA		4 D D D C C C					
STREET ADDRESS	1	S CITY FL					ADDRESS					
CITY-ST-ZIP TITLE	VD			☐ DELETE	3.4 CI		1-214			Γ	Change	Addition
NAME	_	MERY, ARTHUR			4.2 NA						J change	
STREET ADDRESS		POWERLINE RD., #124	ļ				ADDRESS					
CITY-ST-ZIP	HAINE	S CITY FL			1							
TITLE	D			□ DELETE	4.4 CITY - S 5. 1 TITLE		1 - 211				) Change	Addition
NAME	BEIDE	CK, ALTON		<del></del>	5.2 NA					_		_
STREET ADDRESS	2900	POWERLINE RD #101					ADDRESS					
CITY-ST-ZIP	HAINE	ES CITY FL			5.4 CI							ļ
TITLE	D			☐ DELETE	6. 1 7(						] Change	Addition
NAME		d, Eugene			6.2 NA	<b>IME</b>						
STREET ADDRESS		POWERLINE RD # 14			6.3 ST	REET.	ADDRESS					
CITY-ST-ZIP	HAINE	S CITY FL			6.4 CI	TY- \$1	T- ZIP					
	v certify that	the information supplied w	ith this	filing is voluntarily furnis	hed and	does	not qua	lify for	the exemption stated in Section 119	07(3)(k), Flor	ida Statut	tes. I further

oethis 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 or Blo

SIGNATURE: WILLIAM W. W.

SecTy 3-15-96 (94) 422-5441

Date Date Dayrine Phone: