FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (1)S70388 **DOCUMENT #** WATER'S EDGE R.V. RESORT, INC. Mailing Address Principal Place of Business 35310 HIGHWAY 54 WEST 35310 HIGHWAY 54 WEST ZEPHYRHILLS FL 33541 ZEPHYRHILLS FL 33541 3a. Date of Last Report 3. Date Incorporated or Qualified 01/27/1995 08/02/1991 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 59-3084361 26 21 \$8.75 Additional Suite. Apt. #, etc. 5. Certificate of Status Desired Suite, Apt. #, etc Fee Required 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State \Box Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s. 199.032, Country Country Ζıρ Yes No Florida Statutes 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent CAPITAL CONNECTION INC. 417 E. VIRGINIA STREET SUITE 1 TALLAHASSEE FL 32301 SIALites, the above named corporation submits ithorized by the corporation's board of directors Pursuant to the provisions of S or registered agent, or both, familiar with, and accept the or ithe S SIGNATURE. CR2E034 (12/95) OFFICERS AND DIRECTORS 12. Addition Change DELETE 1 1 3 I I I F TITLE 1.2 NAME HILL, CARL D. NAME 13 STREET ADDRESS 34740 CARL AVENUE STREET ADDRESS 1.4 CITY - ST - ZIP ZEPHYRHILLS FL CITY-ST-ZIF Addition DELETE 2 1 T.TLE THLE 2.2 NAME NAME 2.3 STREET ADOPESS STREET ADDRESS 2.4 CHY ST-ZIP Addition CrTY-ST-ZiP Change DELETE 3 1 True TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - \$1 - ZIP CITY - S1 - ZIP Change ☐ Addition DELETE 4 1 TILLE TITLE 4.2 NAMS NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP 60000179172명 -04/24/96--01002--022 Addition DELETE 5 1 TITLE THLE 5.2 NAME NAME 5.3 STREET ADDRESS ***200.00 STREET ADDRESS 5 4 CITY - ST - ZIF CHTY - SY - ZIP Criange DELETE 6 1 H/LF TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report is 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 composition of the deservor or truster structure of the second of the composition of the deservor or truster structure of the second of the composition of the deservor or truster structure of the second of t 6.4 CiTY - ST - ZIP

OR DIRECTOR

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