FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED

95 MAY 11 PM 10:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V49620** **(0)**

1. Current Name
AKERS TRAILER PARK, INC.

Principal Place of Business	Mailing Address
1610 4TH STREET TAFT FL 32824	1610 4TH STREET TAFT FL 32824

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **07/06/1992**	3a. Date of Last Report: **05/01/1994**
4. FEI Number: **59-3153990**	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
8. Is this corporation operating in Florida as defined in s. 607.0501, Florida Statutes? ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. # or Bldg.	Suite, Apt. # or Bldg.
22	27
City & State	City & State
23	28
24 / 25	29 / 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
KREMER, GEORGE F. 1610 4TH ST. ORLANDO FL 32824	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 Section 607.0502, 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TYPE	D	71 TYPE	☐ Change ☐ Addition
12 NAME	KREMER, SHERRY L	72 NAME	
13 STREET ADDRESS	1610 4TH STREET	73 STREET ADDRESS	
14 CITY ST ZIP	TAFT FL	74 CITY ST ZIP	
21 TYPE	D	75 TYPE	☐ Change ☐ Addition
22 NAME	KREMER, GEORGE F	76 NAME	
23 STREET ADDRESS	1610 4TH STREET	77 STREET ADDRESS	
24 CITY ST ZIP	TAFT FL	78 CITY ST ZIP	
31 TYPE		81 TYPE	☐ Change ☐ Addition
32 NAME		82 NAME	
33 STREET ADDRESS		83 STREET ADDRESS	
34 CITY ST ZIP		84 CITY ST ZIP	
41 TYPE		85 TYPE	☐ Change ☐ Addition
42 NAME		86 NAME	
43 STREET ADDRESS		87 STREET ADDRESS	
44 CITY ST ZIP		88 CITY ST ZIP	
51 TYPE		91 TYPE	☐ Change ☐ Addition
52 NAME		92 NAME	
53 STREET ADDRESS		93 STREET ADDRESS	
54 CITY ST ZIP		94 CITY ST ZIP	
61 TYPE		95 TYPE	☐ Change ☐ Addition
62 NAME		96 NAME	
63 STREET ADDRESS		97 STREET ADDRESS	
64 CITY ST ZIP		98 CITY ST ZIP	

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)(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 11 or Block 71 if changed, or on an attachment with an address.

SIGNATURE: Sherry L. Kremer 5/8/95 852-6128
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Daytime Phone #

0084408 CP