

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 278780

Entity Name: CAMWIL CORPORATION**Current Principal Place of Business:**3615 W. JETTON AVE
TAMPA, FL 33629**Current Mailing Address:**5908 GLEN FOREST LN.
KNOXVILLE, TN 37919 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HENGSTLER, ZIBELLE W
3615 W. JETTON AVE
TAMPA, FL 33629 US*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.***SIGNATURE:** ZIBELLE W. HENGSTLER

02/23/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title VPD
Name WILSON, JAMES B
Address 3615 W. JETTON
City-State-Zip: TAMPA FL 33629Title D
Name HENGSTLER, ZIBELLE W
Address 5908 GLEN FOREST LN.
City-State-Zip: KNOXVILLE TN 37919Title STD
Name HENGSTLER, DENNIS D
Address 5908 GLEN FOREST LN.
City-State-Zip: KNOXVILLE TN 37919Title P
Name HENGSTLER, ZIBELLE W
Address 5908 GLEN FOREST LN.
City-State-Zip: KNOXVILLE TN 37919Title D
Name WILSON, CAMYLLE D
Address 3615 JETTON AVE
City-State-Zip: TAMPA FL 33629

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ZIBELLE W. HENGSTLER

PRESIDENT

02/23/2015

Electronic Signature of Signing Officer/Director Detail

Date