

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 415945

FILED  
Apr 07, 2009  
Secretary of State

Entity Name: BURNT STORE CAMPGROUND CORP.

## Current Principal Place of Business:

5000 DELTONA DRIVE  
PUNTA GORDA, FL 33950

## New Principal Place of Business:

## Current Mailing Address:

5000 DELTONA DRIVE  
PUNTA GORDA, FL 33950

## New Mailing Address:

FEI Number: 59-1695969

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARRARD, THOMAS W  
520 OLYMPIA AVE  
PUNTA GORDA, FL 33950 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LISBY, DREW,  
Address: 527 W PALM AVE  
City-St-Zip: PUNTA GORDA, FL

Title: VD ( ) Delete  
Name: LISBY, NANCY,  
Address: 527 W PALM AVE  
City-St-Zip: PUNTA GORDA, FL

Title: VD ( ) Delete  
Name: LISBY, CHARLES,  
Address: 527 W PALM AVE  
City-St-Zip: PUNTA GORDA, FL

Title: VD ( ) Delete  
Name: LISBY, TIMOTHY,  
Address: 5438 PAPAYA DR.  
City-St-Zip: PUNTA GORDA, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LISBY, DREW,  
Address: 527 W PALM AVE  
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: VD (X) Change ( ) Addition  
Name: LISBY, NANCY,  
Address: 527 W PALM AVE  
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: VD (X) Change ( ) Addition  
Name: LISBY, CHARLES,  
Address: 527 W PALM AVE  
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: VD (X) Change ( ) Addition  
Name: LISBY, TIMOTHY,  
Address: 527 PALM AVE  
City-St-Zip: PUNTA GORDA, FL 33950 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NANCY L. LISBY

SECY

04/07/2009

Electronic Signature of Signing Officer or Director

Date