

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 507748

FILED  
Feb 27, 2007  
Secretary of State

Entity Name: CAMACHEE ISLAND COMPANY, INC.

## Current Principal Place of Business:

3070 HARBOR DRIVE  
CAMACHEE ISLAND  
SAINT AUGUSTINE, FL 32084

## New Principal Place of Business:

## Current Mailing Address:

3070 HARBOR DRIVE  
CAMACHEE ISLAND  
SAINT AUGUSTINE, FL 32084

## New Mailing Address:

FEI Number: 59-1677043

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

UPCHURCH, FRANK D., III  
780 NORTH PONCE DE LEON BLVD  
ST. AUGUSTINE, FL 32084 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: P ( ) Delete  
Name: MC KENNA, SEAN  
Address: 3070 HARBOR DRIVE  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: VS ( ) Delete  
Name: SABO, PETER  
Address: 3070 HARBOR DRIVE  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: V ( ) Delete  
Name: FITZGERALD, PERRY  
Address: 3070 HARBOR DRIVE  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: T ( ) Delete  
Name: UPSON, MARLENE  
Address: 3070 HARBOR DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32084

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARLENE UPSON

T

02/27/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date