

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 13, 2006 8:00 am
Secretary of State

03-13-2006 90055 042 ***150.00

DOCUMENT # 644293

f. Entity Name

GARNER CAMP, INC.



Principal Place of Business
**C/O FREDDIE GARNER
14844 LEE ROAD
GROVELAND FL 34736**

Mailing Address
**C/O FREDDIE GARNER
14844 LEE ROAD
GROVELAND FL 34736**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GARNER, FREDDIE
14844 LEE RD.
GROVELAND FL 34736**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when constituting)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **GARNER, FREDDIE G**
STREET ADDRESS **14844 LEE RD**
CITY-ST-ZIP **GROVELAND FL 34736**

TITLE **ST** ☐ Delete
NAME **GARNER, MIHAEL**
STREET ADDRESS **16848 TWSCANOOGA R**
CITY-ST-ZIP **GROVELAND FL 34736**

TITLE **D** ☐ Delete
NAME **GARNER, DANNY**
STREET ADDRESS **14844 LEE RD**
CITY-ST-ZIP **GROVELAND FL 34736**

TITLE **D** ☐ Delete
NAME **HOOTEN, MARGARET**
STREET ADDRESS **PO BOX 583, 1106 SE 2ND AVE**
CITY-ST-ZIP **STEINHATCHEE FL 32359**

TITLE **D** ☐ Delete
NAME **SUMMERS, JAUNITA**
STREET ADDRESS **870 SW 103RD ST**
CITY-ST-ZIP **GROVELAND FL**

TITLE **D** ☐ Delete
NAME **GARNER, RICKY**
STREET ADDRESS **1205 PENN ST**
CITY-ST-ZIP **LEESBURG FL 34748**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Freddie G. Garner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/27-06

352-429-2628