


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 08, 2007 08:00 AM
Secretary of State

DOCUMENT # 644293 1. 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
--	--



02082007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
---------------------------------	-------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	--

6. Name and Address of Current Registered Agent GARNER, FREDDIE 14844 LEE RD. GROVELAND, FL 34736
--

**DO NOT WRITE
IN THIS SPACE**

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 Freddie G. Garner

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

(NOTE: Registered Agent signature required when reinstating)

March 6-07

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARNER, FREDDIE G 14844 LEE RD GROVELAND, FL 34736
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GARNER, MIHAEL 16848 TWSCANOOGA R GROVELAND, FL 34736
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARNER, DANNY 14844 LEE RD GROVELAND, FL 34736
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOOTEN, MARGARET PO BOX 583, 1106 SE 2ND AVE STEINHATCHEE, FL 32359
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUMMERS, JAUNITA 870 SW 103RD ST GROVELAND, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARNER, RICKY 1205 PENN ST LEESBURG, FL 34748

U000000659615
03/16/07-00033-016 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

March 6-07

Date

Daytime Phone #