## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 654002**

Entity Name: HONEST JOHN'S FISH CAMP INC.

FILED Mar 10, 2008 Secretary of State

Littly Na	IIIE. HONEST	JOHN S FISH CAME, INC.		
Current P	rincipal Place	e of Business:	New Principal Place	e of Business:
	ET CREEK RO RNE BEACH, F			
Current Mailing Address:			New Mailing Address:	
	ET CREEK RO RNE BEACH, F			
FEI Number	: 59-1975187	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	l Address of (	Current Registered Agent:	Name and Address	of New Registered Agent:
	ROBERT ET CREEK RI RNE BEACH, F			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
SIGNATUI	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
Election Car	mpaign Financin	g Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	ARTHUR, ROB 750 MULLET C		Title: Name: Address: City-St-Zip:	( ) Change() Addition
Title: Name: Address: City-St-Zip:	ARTHUR, BAR 750 MULLET C		Title: Name: Address: City-St-Zip:	( ) Change() Addition
Title: Name: Address: City-St-Zip:	VP ( ARTHUR, ROB 750 MULLET C MELBOURNE	REEK ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	ARTHUR, JONA 750 MULLET C		Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	V (	) Delete	Title ·	( ) Change ( ) Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERT ARTHUR PD 03/10/2008

ARTHUR, JASON

750 MULLET CREEK ROAD

MELBOURNE BEACH, FL 32951

Name:

Address:

City-St-Zip: