2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F09112

t. Entity Name

MYAKKA VALLEY CAMPGROUNDS & STABLES, INC.



Mar 17, 2006 08:00 AM Secretary of State

01212006

Principal Place of Business

% LYLE C WARNER 7220 MYAKKA VALLEY TRAIL SARASOTA, FL 34241

Mailing Address

% LYLE C WARNER

* 7220 MYAKKA VALLEY TRAIL SARASOTA, FL 34241



CR2E034 (11/05)

FILED

O NOT WRITE	IN THIS	SPACE
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4. FEI Number	Applied For
59-2070978	Not Applicable

\$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

WARNER, LYLE C 7220 MYAKKA VALLEY TRAIL SARASOTA, FL 34241

DO NOT WRITE IN THIS SPACE

No Chg-P

	named entity submits this statement for the plions of registered agent.	urpose of changing its registered	office or r	egistered agent, or bol	th, in the State of Florida. I am familiar with, and accept
SIGNATURE -	Signature, typed or printed name of registered agent and title if	f epplicable. (NOTE, Registered Ag	ent signature	क्राजीक्षांका त्थांभ्य क्राच्याच्छा ।	DATE
FIL After M	E NOWIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financin Trust Fund Contribution.	° 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
inle Name Sircet address Chty-St-Zip	PST WARNER, LYLE C. 7220 MYAKKA VALLEY TRAIL SARASOTA, FL 3,				U00000471954 03/29/06-80017-021 150.00
ittle Name Street address City-St-Zip					
NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
itle Name Strelt address City-St-Zip			IN THIS SPACE		
IRLE NAME STREET ADDRESS CHY-ST-ZIP					
HITLE HAME STREET ADDRESS CITY-ST-ZIP				·	

12. I hereby certify that the information supplied with this filling 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 fusite 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:

ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR