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PROFIT CORPORATION ANNUAL REPORT

1997

appears in Block 12 or Block

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 21 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9300004154 (1)

CAMP WINADU INCORPORATED

Principal Place	e of Business	Mailing Address 2255 GLADES RD., STE, 406E BOCA RATON FL, 33431-7379					
MASS PITTSFIELD MA	A 01201						
03					3. Date Incorporated or Qualified 09/08/1993	3a. Date of Las 01/23/1990	
2. Principal Place of Business 2a. Mailing Ad			ress		4, FEI Number		Applied For
Cuito Ant # ata		26			04-2537930	04-2537930 Not Applicabl	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	1 1	\$8.75 Additional Fee Required	
City & State	6	City & State			Election Campaign Financing Trust Fund Contribution		May Be
Zip	Country	Zip	Count	у	8. This corporation has liability for	intangible tax unde	
4	25	[29]	30			Yes No	·
	g. Name and Address of Curre	nt Registered Agent		1 1	10. Name and Address of New Re	gistered Agent	
	NER, ARLEEN		8	Name			
2255 GLADES RD., STE. 406E BOCA RATON FL 33431			8		dress (P.O. Box Number is Not Acceptab	le)	
			8:	3			
			8	City		FL 85 Z	p Code
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change v	vas authorized l	ov the corpora	rporation submits this statement for the pation's board of directors. I hereby accept	uroope of changing	g its registered as registered
SIGNATURE	Signature Type: For photed name of registered ag	west and allo if producable	MOTE President &		uired when reinstaling)	DATE	
12.	· · · · · · · · · · · · · · · · · · ·	ID DIRECTORS	13.	gent signature reck	ADDITIONS/CHANGES TO OFFIC		OPS IN 12
THTLE	P	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFIC	Chang	
NAME	WEINER, SHELLEY		1.2 NAME				
STREET ADDRESS	2255 GLADES RD 406 E			T ADDRESS			
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY				
TITLE	S	DELETE	2.1 TiTLE			Chang	e Addition
NAME	WEINER, ARLEEN		2.2 NAME				
STREET ADDRESS	2255 GLADES RD 406 E		1	ET ADDRESS	- ·	•	
CITY - ST - ZIP	BOCA RATON FL		2. 4 CITY				
TITLE		☐ DELETE	3.1 TITLE			Chang	e 🔲 Addition
NAME			3.2 NAMI				
STREET ADDRESS				ET ADDRESS			
DITY - ST - ZIP			3.4. CITY				
TITLE		DELETE	4,1 TITLE			Chang	e Addition
NAME			4. 2 NAM	E			•
STREET ADDRESS				T ADDRESS			
CITY - ST - ZIP			4.4 CITY				
THTLE		☐ DELETE	5.1 T(TLE			Chang	e Addition
NAME		_	5.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			5.4 CITY				
THLE		DELETE	6.1 TITLE			☐ Chang	e Addition
NAME			6.2 NAME				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			6.4 CITY				
14. I do heret	by certify that the information supplied	ed with this filing does not a	uality for the ex	emption state	ed in Section 119.07(3)(i), Florida Statute	s. I further certify th	at the
informatio	n indicated on this annual report or:	supplemental annual renor	t is true and acc	curate and tha	at my signature shall have the same lega ort as required by Chapter 607, Florida S	l affect as if mode	under nath: the