2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2005 08:00 AM
Secretary of State

DOCUMENT # G96972

1. Entity Name
CAMERON'S BRITISH FOODS, INC.

Principal Place of Business
928 NORTHEAST 24TH LANE
CAPE CORAL, FL 33909

Mailing Address
928 NORTHEAST 24TH LANE
CAPE CORAL, FL 33909

01062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2379950
Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CAMERON, DONALD
8400 HENDERSON GRADE
N FT MYERS, FL 33917

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CAMERON, DONALD
STREET ADDRESS	8400 HENDERSON GRADE
CITY-ST-ZIP	N FT MYERS, FL 33917
TITLE	SD
NAME	CAMERON, BONNIE
STREET ADDRESS	8400 HENDERSON GRADE
CITY-ST-ZIP	N FT MYERS, FL 33917
TITLE	VPP
NAME	CAMERON, DONALD JR
STREET ADDRESS	20540 FERN CIR
CITY-ST-ZIP	N. FORT MYERS, FL 33917
TITLE	T
NAME	CAMERON, AMBER
STREET ADDRESS	20540 FERN CIR
CITY-ST-ZIP	N FORT MYERS, FL 33917
TITLE	VPI
NAME	CAMERON, JEREMY S
STREET ADDRESS	8400 HENDERSON GRADE
CITY-ST-ZIP	N FORT MYERS, FL 33917
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000244490
02/26/05-80022-019 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____ 2/23/05 239 772 1554
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #