

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H40094

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: SANLAN RANCH CAMPGROUND, INC.

## Current Principal Place of Business:

2925 SANLAN RANCH DRIVE  
LAKELAND, FL 338124226

## New Principal Place of Business:

## Current Mailing Address:

2925 SANLAN RANCH DRIVE  
LAKELAND, FL 338124226 US

## New Mailing Address:

2925 SANLAN RANCH DRIVE  
LAKELAND, FL 338124226

FEI Number: 59-2484812

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOLLOWAY, EMMETT E PRES.  
2925 SANLAN RANCH DRIVE  
LAKELAND, FL 33812 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: HOLLOWAY, E E JR  
Address: 1603 MEADOWBROOK AVE  
City-St-Zip: LAKELAND, FL 33803

Title: DS ( ) Delete  
Name: HOLLOWAY, MARY ANN,  
Address: 1603 MEADOWBROOK AVE  
City-St-Zip: LAKELAND, FL

Title: VP ( ) Delete  
Name: HOLLOWAY, DAVID W  
Address: 2925 SANLAN RANCH DRIVE  
City-St-Zip: LAKELAND, FL 33812

Title: D ( ) Delete  
Name: HOLLOWAY, LINDA A  
Address: 2025 SYLVESTER ROAD, I-3  
City-St-Zip: LAKELAND, FL 33803

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: HOLLOWAY, EMMETT E  
Address: 1603 MEADOWBROOK AVE  
City-St-Zip: LAKELAND, FL 33803

Title: DS (X) Change ( ) Addition  
Name: HOLLOWAY, MARY ANN,  
Address: 1603 MEADOWBROOK AVE  
City-St-Zip: LAKELAND, FL 33803

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: EMMETT E HOLLOWAY

DP

03/19/2009

Electronic Signature of Signing Officer or Director

Date