

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J87742

Entity Name: CAP'T J. B.'S FISH CAMP, INC.

FILED
Jan 17, 2009
Secretary of State

Current Principal Place of Business:

859 POMPAÑO ST.
NEW SMYRNA BEACH, FL 321701404

New Principal Place of Business:

Current Mailing Address:

PO BOX 1404
NEW SMYRNA BEACH, FL 321701404 US

New Mailing Address:

FEI Number: 59-2876529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOLLMAN, JOHN A.
6750 TURTLEMOUND RD
NEW SMYRNA BEACH, FL 321694913 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: PT () Delete
Name: BOLLMAN, JOHN A., II, I
Address: 6750 TURTLE MOUND RD.
City-St-Zip: NEW SMYRNA BEACH, FL 321694913

Title: S () Delete
Name: SCHULZ, PAUL D. CPA
Address: 1724 SOUTH NOVA RD.
City-St-Zip: DAYTONA BEACH, FL 321191728

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JOHN A BOLLMAN III

PT

01/17/2009

Electronic Signature of Signing Officer or Director

Date