2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K18664

Entity Name: U-CAMP, INC.

FILED May 01, 2005 Secretary of State

Entity Nar	me: U-CAMP,	INC.				
Current Principal Place of Business:			New Principal Place of Business:			
6333 N. DA TAMPA, FI	ALE MABRY H L 33614	WY				
Current Mailing Address:			New Mailing Address:			
6333 N. DA TAMPA, FI	ALE MABRY H L 33614	WY				
FEI Number:	: 59-2878430	FEI Number Applied For()	FEI Number Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
10 PAPAY. 702	ON, WALTER V A ST ATER, FL 3376					
	named entity see of Florida.	submits this statement for the p	ourpose of changing it	s registered off	ice or registered agent, or both,	
SIGNATUR	RE:					
	Electron	ic Signature of Registered Age	ent		Date	
		3(2)(b), F.S., the corporation did no I Trust Fund Contribution ().	ot receive the prior notice	э.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () TOUCHTON, W 10 PAPAYA ST CLEARWATER	#702	Title: Name: Address: City-St-Zip:	()	Change ()Addition	
Title: Name: Address: City-St-Zip:	DVTS () TOUCHTON, JO 10 PAPAYA ST CLEARWATER	#702	Title: Name: Address: City-St-Zip:	() (Change ()Addition	
Title: Name: Address: City-St-Zip:	TOUCHTON, W 9890 2ND STRI		Title: Name: Address: City-St-Zip:	() (Change ()Addition	
Title: Name: Address:	VP () TOUCHTON, JA 9890 2ND STRI		Title: Name: Address:	VP (X) (TOUCHTON, JAC 10 PAPAYA ST :		

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip: CLEARWATER, FL 33767

SIGNATURE: JOANN H TOUCHTON VP 05/01/2005

SAINT PETERSBURG, FL 33702

City-St-Zip: