

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 13, 2006 08:00 AM
Secretary of State

DOCUMENT # K28976	
1. Entity Name LITTLE CHARLIE CREEK R. V. PARK, INC.	
Principal Place of Business HIGHWAY 664 A WAUCHULA, FL 33873	Mailing Address 1075 HIGHWAY 17 SOUTH P.O. BOX 815 WAUCHULA, FL 33873-0815



01112006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0068978.	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

MARTIN E. SNOW, JR.
200 LAKE MORTON DRIVE
SUITE 300
LAKELAND, FL

**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

U000000386478
01/18/06-80061-017 150.00

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHAPMAN, A.R. 1075 HIGHWAY 17 SOUTH WAUCHULA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARRISH, R. WAYNE 1075 HIGHWAY 17 SOUTH WAUCHULA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARRISH, CYNTHIA C. 1075 HIGHWAY 17 SOUTH WAUCHULA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Cynthia C. Parrish

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Cynthia C. Parrish

1/11/06

Date

863.773-3161

Daytime Phone #