## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # N01000001682

1, Enuty Name BOWLEGS CAMP, INC.

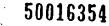


**FILED** Apr 25, 2006 8:00 am Secretary of State 04-25-2006 90116 047 \*\*\*\*61.25

Principal Place of Business

HC 1 BOX 179 HORSESHOE BEACH, FL 32648 Mailing Address

HC 1 BOX 179 HORSESHOE BEACH, FL 32648





## DO NOT WRITE IN THIS SPACE

04192006 No Chg-NP CR2E037 (11/05)

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11-3690680	F	Vot Applicable
4. FEI Number		Applied For

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARRIS, BLAINE C HC 1 BOX 179 HORSESHOE BEACH, FL 32648

**SIGNATURE** 

## 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. Ham familiar with, and accept the obligations of registered agent.							
SIGNATURE	SIGNATURE						
	Filing Fee is \$61.25 Due by May 1, 2006	Election Campaign Financ     Trust Fund Contribution.	ing 🗆	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS			<u> </u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ROTENBERGER, RAY 6910 E LEANING OAKS CT INVERNESS, FL 32650						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRIS, CHARLIE HC 1 BOX 179 HORSESHOE BEACH, FL 32648						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST HARRIS, BLAINE HC 1 BOX 179 HORSESHOE BEACH, FL 32648		DO NOT WRITE				
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TITLE							
NAME							
STREET ADDRESS CITY-ST-ZIP		į					
	partify that the information appoint with this E	ilion dans not qualify for the ave		atained in Chanter 11	O. Florido Cretatos I fruther contife that the '-f'		
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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attached 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attached 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attached 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if the same legal effect as if made under oath in the same legal effect as if made under oath in the same legal effect as if made under oath in the same legal effect as if made under oath in the same legal effect as if made under oath in the same legal effect as if made under oath in the same legal effect as if made under oath in the same legal effect as if made under oath in the same legal effect as if made under oath in the same legal effect as if made under oath in the same legal effect as if made under oath in the same legal effect as if made under oath in the same legal effect as if made under oath in the same legal effect as if made under oath i							