

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 28, 2008 08:00 A
Secretary of State

DOCUMENT # N03000010389

1. Entity Name
CAMP FUN-TO-BRUSH, INC.



Principal Place of Business
**10252 SW 12TH STREET
PEMBROKE PINES, FL 33025**

Mailing Address
**10252 SW 12TH STREET
PEMBROKE PINES, FL 33025**



01232008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
65-0694656

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**LEWIS, JERRY SR.
10252 SW 12TH STREET
PEMBROKE PINES, FL 33025**

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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

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**U00000873588
04/10/08-80086-001 70.00**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	LEWIS, SONYA D DMD
STREET ADDRESS	14041 MUSTANG TRAIL
CITY-ST-ZIP	SW RANCHES, FL 33330
TITLE	V
NAME	LEWIS, DOLORES J
STREET ADDRESS	10252 SW 12TH STREET
CITY-ST-ZIP	PEMBROKE PINES, FL 33025
TITLE	S
NAME	LEWIS, JERRY JR.
STREET ADDRESS	10252 SW 12TH STREET
CITY-ST-ZIP	PEMBROKE PINES, FL 33025
TITLE	D
NAME	LEWIS, JERRY SR.
STREET ADDRESS	10252 SW 12TH STREET
CITY-ST-ZIP	PEMBROKE PINES, FL 33025
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 617, 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: *Jerry Lewis* **JERRY LEWIS**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

26 MAR 2008

Date

954-430-3292

Daytime Phone #