FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N11938

1. Corporation Name

CAMP ARMO, INC.

Principal Place of Business

P.O. BOX 5000 GOB MC 5284

2. Principal Place of Business

Suite, Apt. #, etc.

ALTAMONTE SPRINGS FL 32716

GERALDINE LEAMAN

21

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

26

GERALDINE LEAMAN P.O. BOX 5000 GOB MC 5284 ALTAMONTE SPRINGS FL 32716

FILED Feb 11, 1999 8:00am **Secretary of State**

02-11-1999 90005 045 ****61.25



3. Date incorporated or Qualifed

11/07/1985

59-2620213

4. FEI Number

Zip Country Zip Country G. Election Campaign Financing Added to Fees 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GERALDINE LEAMAN 3305 CURTIS DR APOPKA FL 32703 82 Street Address (P.O. Box Number is Not Acceptable) 83 APOPKA FL 32703 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS. 11.11 III. Change Addition	City & State			City & State					Contiforts of Sta	tue Desired		\$8.75 Ad	
Zip Country Zip Country 6. Election Campaign Financing Added to Fees 9. Name and Address of Current Registered Agent 10. Name Address of New Registered Agent 11. Name Address of New Registered Agent 12. Street Address (P.O. Box Number is Not Acceptable) 3305 CURTIS DR APOPKA FL 32703 44. City FL as Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am milliar with, and ecosyth the obligations of, Section 17.0502, Fiorida Statutes. SIGNATURE Signature, Specific provision clarge of Ingitized agent and the X explication of Section 17.0502, Fiorida Statutes. SIGNATURE Signature, Specific provision clarge of Ingitized agent and the X explication of Section 17.0502, Fiorida Statutes. SIGNATURE Signature, Specific provision clarge of Ingitized agent and the X explication of Section 17.0502, Fiorida Statutes. SIGNATURE Signature, Specific provision clarge of Ingitized agent and the X explication of Section 17.0502, Fiorida Statutes. SIGNATURE Signature, Specific provision clarge of Ingitized agent and the X explication of Section 17.0502, Fiorida Statutes. SIGNATURE Signature, Specific provision clarge of Ingitized agent and the X explication of Ingitized agent agent and Ingitized agent	_	ony a olate		28					5. Certificate of Status Desired			Fee Required	
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent GERALDINE LEAMAN 3305 CURTS DR APOPKA FL 32703 41 City FL 35 Zip Code 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am milliar with, and accept the obligations of, Section 17,0502, Florida Statutes but the corporation's board of directors, i hereby accept the appointment as registered agent. I am milliar with, and accept the obligations of, Section 17,0502, Florida Statutes. SIGNATURE Signature, specific prince of registered agent of the in milliar with, and accept the obligations of, Section 17,0502, Florida Statutes. SIGNATURE Signature, specific prince of registered agent and the if explicates OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 25. NAVE STANALAND, WOODY 12. NAVE 12. NAVE STANALAND, WOODY 13. STREET ADDRESS CITY-ST-2P TITLE VD OATES, DAVID 32. STREET ADDRESS CITY-ST-2P CHULUOTA FL 12. NAVE 13. STREET ADDRESS CITY-ST-2P CHULUOTA FL 14. TITLE 15. LEAMAN, GERALDINE 33. STREET ADDRESS CITY-ST-2P CHULUOTA FL 15. NAME 15. N			二	Zip Co			ountry			-		•	-
GERALDINE LEAMAN 3305 CURTIS DR APOPKA FL 32703 11. Pursuant to this provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-registered agent, or both, in the State of Florida, Such change was authorized by the comporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Section 617,0503, Florida Statutes, the above-registered agent displayed agent, or both, in the State of Florida, Such change was authorized by the comporation's board of directors, I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-registered agent agent, or both, in the State of Florida, Such change was authorized by the comporation's board of directors, I hereby accept the appointment as registered displayed agent, or both, in the State of Florida, Such change was authorized by the comporation's board of directors, I hereby accept the appointment as registered displayed agent, or both, in the State of Florida, Such change was authorized by the comporation's board of directors, I hereby accept the appointment as registered displayed agent, or both, in the State of Florida, Such change was authorized by the comporation's board of directors, I hereby accept the appointment as registered displayed agent, or both, in the State of Florida, Statutes, the above accept the appointment as registered displayed agent, or both, in the State of Florida, Statutes, the above accept the appointment as registered displayed agent, or both, in the statement for the unposed directors, I hereby accept the appointment as registered displayed agent, or both, and accept the appointment as registered displayed agent, or both and accept the appointment as registered displayed agent, or both and accept the appointment as registered agent, or both and accept the appointment as registered agent, or both and accept the appointment as registered agent, or both and accept the appointment as registered ag	4						Trust I und Contabasion						
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3305 CURTIS DR APOPKA FL 32703 34	GERALDINE LEAMAN					82 Street Address (P.O. Box Number is Not Acceptable)							
APOPKA FL 32703 11. Pursuant to the provisions of Sactions 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME STANALAND, WOODDY 12. NAME STANALAND, WOODDY 12. NAME OATES, DAVID 22. NAME ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME OATES, DAVID 22. NAME 23. STREET ADDRESS CITY-ST-ZP WINTER PARK FL OATES, DAVID 23. STREET ADDRESS CITY-ST-ZP CHULUOTA FL 13. ITILE OCHange Addition 14. CITY-ST-ZP OCHILUOTA FL 13. ITILE OCHANGES CITY-ST-ZP CHULUOTA FL 14. TITLE 15. TITLE 15. TITLE 15. TITLE 15. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 14. CITY-ST-ZP WINTER PARK FL 15. TITLE 15. TITLE													
11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, and accept the outglations of, Section 617 0503, Florida Statutes. 12.						83				•			
Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent, and accept the obligations of, Section 617 0503, Florida Statutes.	74 01 1011	2 02. 00				84	City					85 Zip C	ode
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i nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if granged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Applied For

Not Applicable