

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$395)

**NONPROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
 Sandra B. Morham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

95 JUL 25 AM 8:09

DOCUMENT # N94000004232 (4)

1. Corporation Name

LIL' BOOT CAMP, INC.

Principal Place of Business

12387 SILENT BROOK TRAIL
 JACKSONVILLE FL 32224

Mailing Address

12387 SILENT BROOK TRAIL
 JACKSONVILLE FL 32224

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

08/29/1994

3a. Date of Last Report

4. FEI Number

59-3266052

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
 Fee Required

6. Election Campaign Financing
 Trust Fund Contribution

☐ \$5.00 May Be
 Added to Fees

7. Nonprofit with IRS 501(c)(3)
 Tax Exempt Status

☐ **FILING FEE IS
 \$61.25**

8. This corporation has liability for intangible tax under s. 199.032,
 Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

9. Name and Address of Current Registered Agent

JENKINS, ROSS C
 14122 CRYSTAL COVE DRIVE
 JACKSONVILLE FL 32224

10. Name and Address of New Registered Agent

81 Name

Walter N. Williams

82 Street Address (P.O. Box Number is Not Acceptable)

12387 Silent Brook Trail N.

83

84 City

Jacksonville

FL

85 Zip Code

32225

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

Walter N. Williams Vice Pres.

DATE

July 21/95

12. OFFICERS AND DIRECTORS

TITLE D
 NAME WILLIAMS, MARTHA
 STREET ADDRESS 12387 SILENT BROOK TRAIL
 CITY - ST - ZIP JACKSONVILLE FL 32224

TITLE D
 NAME ROBBINS, DEBBIE
 STREET ADDRESS 886 B ENGLAND STREET
 CITY - ST - ZIP JACKSONVILLE FL

TITLE D
 NAME WILLIAMS, WALTER N
 STREET ADDRESS 12387 SILENT BROOK TRAIL
 CITY - ST - ZIP JACKSONVILLE FL 32224

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
 12 NAME
 13 STREET ADDRESS
 14 CITY - ST - ZIP

21 TITLE
 22 NAME
 23 STREET ADDRESS
 24 CITY - ST - ZIP

31 TITLE
 32 NAME
 33 STREET ADDRESS
 34 CITY - ST - ZIP

41 TITLE
 42 NAME
 43 STREET ADDRESS
 44 CITY - ST - ZIP

51 TITLE
 52 NAME
 53 STREET ADDRESS
 54 CITY - ST - ZIP

61 TITLE
 62 NAME
 63 STREET ADDRESS
 64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 changed, or on an attachment with an address.

SIGNATURE:

Debbie M. Robbins Sec. Tr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 21/95 904-270-1333