2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N98000002286



INC.	OF ICHETUCKNEE SPRI	INGS STAT	E PARK,	!								
196 SW MISSION SPRINGS COURT 196			lailing Address 196 SW MISSION SPRINGS COURT ORT WHITE, FL 32038						The same of the same	AND THE PERSON	-	
2. Principal F	Place of Business	3. Mailing /	Address			_						
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Suite, Apt.	#, etc.	Suite, A	pt. #, etc.				01252005	Chg-NP	C	R2E0	37 (10/03	
City & State		City & State				4. FEI Numb 59-348	er 0044			\vdash	Applied For Not Applicable	
Zip Country		Zip	Zip Country				5. Certificate	of Status De	sired		\$8.75 A	Additional
	6. Name and Address of Current	t Registered Ag	jent -				7. Name and	Address of	New Regis	stered /		
HARPER	CRAIG A			İ	Name							
HARPER, CRAIG A 6252 SW ELIM CHURCH ROAD FORT WHITE, FL 32038						iress (P.	O. Box Numb	er is Not Acc	eptable) ಆ			
	,										•	
					City					FL	Zip C	ode
	named entity submits this statement fitions of registered agent.	for the purpose	of changing its re	gistered	d office or re	gistered	agent, or bo	th, in the Sta	te of Florida	a. Iam	familiar wit	th, and accept
the obliga	uons or registered agent.			•								
SIGNATURE	Olember 1 and 1 an										•	
	Signature, typed or printed name of registered agen	nt and title if applicable	. (NOTE: R	legistered .	Agent eignature i	required wi	nen reinstating)			DATE		
	Filing Fee is \$61.25		. (NOTE: R). Election Camp. Trust Fund Cor	aign Fir	nancing	. \$	55.00 May E			checi	k payable	
10.		S	. Election Camp	aign Fir	nancing] \$	55.00 May E		Florida	checi Depar	tment of	State
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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). 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:

2/1/04

386
497
3081

SIGNATURE:

386 497 3081

FILED

Feb 14, 2005 8:00 am Secretary of State

02-14-2005 90066 050 ****61.25