


**2007 FOR PROFIT CORPORATION ANNUAL REPORT.**

**FILED**  
**Jul 05, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P0000022235**  
 1. Entry Name  
**FREECAMP MANAGEMENT INC.**



Principal Place of Business  
**2805 E. OAKLAND PARK BLVD.  
 #405  
 FT. LAUDERDALE, FL 33306**

Mailing Address  
**2805 E. OAKLAND PARK BLVD.  
 #405  
 FT. LAUDERDALE, FL 33306**

**DO NOT WRITE IN THIS SPACE**



07032007 No Chg-P CR2E034 (11/05)

4. FEI Number  
**65-1043278** Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE, FL 32301-2525**

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P FREEBURG, ERIC 2805 E. OAKLAND PARK BLVD #405 FT. LAUDERDALE, FL 33306</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP CAMPITELLI, THOMAS 2805 E. OAKLAND PARK BLVD. FT. LAUDERDALE, FL 33306</b>
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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 607, 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:**  **7/3/07**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #