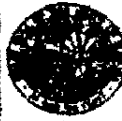


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 11, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000053522

1. Entity Name
JACKSON HOLE RV-FISH CAMP, INC.



Principal Place of Business
**457 RIVER ROAD
LOT 11
OAK HILL, FL 32759**

Mailing Address
**POST OFFICE BOX 1490
EDGEWATER, FL 32132**

DO NOT WRITE IN THIS SPACE



07072004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3721848

5. Certificate of Status Desired ☐ **\$9.75 Additional Fee Required**

Added For
Not Applicable

6. Name and Address of Current Registered Agent
**SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134**

**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 *Douglas L. Jackson* **DOUGLAS L. JACKSON 7-15-04**

Register's office for printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when remaining.)

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

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

08/11/04-80001-007 150.00
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	PSTD JACKSON, DOUGLAS L 457 RIVER ROAD LOT 11 OAK HILL, FL 32759
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PETTIT, DONNA R 457 RIVER ROAD LOT 11 OAK HILL, FL 32759
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), 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, without other fee empowered.

SIGNATURE *Douglas L. Jackson* **7-15-04 386 345-1652**

SIGNATURE AND TITLE OF FILING OFFICER OR DIRECTOR