

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 24, 2008 8:00 am
Secretary of State

02-27-2008 90017 050 ***138.75
03-24-2008 90069 004 ****20.00

DOCUMENT # P02000129611	
1. Entity Name CAMELLIA PLANTATION, INC.	

Principal Place of Business 18050 NE 55 ST WILLISTON FL 32696	Mailing Address 18050 NE 55 ST WILLISTON FL 32696
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address 897 SW 1st Ave.	
Suite, Apt. #, etc.		Suite, Apt. #, etc. Williston, FL	
City & State		City & State FL	
Zip 32696	Country US		

1st MOORE CR2E034 (10/07)

4. FEI Number 41-2070366	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent KENNEDY, BOYER G SR. 19801 NW HWY 335 WILLISTON FL 32696	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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: _____ DATE: _____
Signature, typed or printed name of registered agent and date. (NOTE: Registered Agent's signature required when transferring agent.)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BOYER, KENNEDY G SR 19801 NW HWY 335 WILLISTON FL 32696 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BULLOCK, ROBERT W 505 SW 7TH STREET WILLISTON FL 32696 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BOYER, KENNEDY G JR 19801 NW HWY 335 WILLISTON FL 32696 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition Boyer, Kennedy G Jr. 897 SW 1st Avenue Williston, FL 32696
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BOYER, KENNEDY G JR 19801 NW HWY 335 WILLISTON FL 32696 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR