

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 23, 2007 8:00 am**  
**Secretary of State**

01-23-2007 90040 023 \*\*\*150.00

**DOCUMENT # P04000031558**

1. Entity Name  
**THOMAS LANDING RV & FISH CAMP, INC.**



Principal Place of Business  
**3952 SAM KEEN RD.  
LAKE WALES, FL 33898 US**

Mailing Address  
**3952 SAM KEEN RD. P.O. Box 3903  
LAKE WALES, FL 33898 US  
33859-3903**



01082007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**55-0862886**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**EVANS, BETTY B  
3952 SAM KEEN RD.  
LAKE WALES, FL 33898**

**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 Betty B. Evans, President (NOTE: Registered Agent signature required when reinstating)

DATE 1/17/07

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	EVANS, BETTY B
STREET ADDRESS	3952 SAM KEEN RD.
CITY-ST-ZIP	LAKE WALES, FL 33898
TITLE	VP
NAME	ARNOLD, CHANSEE L
STREET ADDRESS	1590 CLERMONT DR., #101
CITY-ST-ZIP	NAPLES, FL 34109
TITLE	S
NAME	MYERS, LINDA
STREET ADDRESS	1201 SOLANA RD., #5
CITY-ST-ZIP	NAPLES, FL 33940
TITLE	T
NAME	MYERS, LINDA
STREET ADDRESS	12021 SOLANA RD., #5
CITY-ST-ZIP	NAPLES, FL 33940
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 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: Betty B. Evans, President DATE 1/17/07 DAYTIME PHONE # 863-632-0812