

P0400006 8/995

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AND  
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10 APR 26 AM 11:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

BPR  
5/5/10  
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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: LAKE city campground, Inc.  
Name of Corporation

DOCUMENT NUMBER: PO 40000 81995

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LORI ZUCCOLA  
Name of Contact Person

LAKE city CAMPGROUND  
Firm/Company

4743 N. US Hwy 441  
Address

LAKE city, FL 32055  
City/State and Zip Code

LAKE city campground@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LORI ZUCCOLA at (386) 752-9131  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 16, 2010

LORI ZUCCOLA  
4743 N US HWY 441  
LAKE CITY, FL 32055

SUBJECT: LAKE CITY CAMPGROUND, INC.  
Ref. Number: P04000081995

We have received your document for LAKE CITY CAMPGROUND, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Tracy L Lemieux  
Regulatory Specialist II

Letter Number: 510A00009435

RECEIVED  
2010 APR 26 AM 9:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Change from Lake city campground  
to Lori Zuccola. you already  
have my check. Thank you +  
Sorry for the mistake.  
Lori

[www.sunbiz.org](http://www.sunbiz.org)

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LAKE CITY CAMPGROUND
2. The principal office address: 4743 N. US Hwy 441  
LAKE CITY, FL 32055
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 6-17-2004 Document number: PO4000081995
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

CORPORATION SERVICE COMPANY  
1201 HAYES ST  
TALLAHASSEE, FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

LORI A. ZUCCOLA  
~~LAKE CITY CAMPGROUND~~  
4743 N. US Hwy 441  
P.O. Box NOT acceptable  
LAKE CITY, FL 32055

10 APR 20 04 11:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Lori Zuccola  
Signature of an officer or director

Lori Zuccola  
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Lori Zuccola  
Signature of Registered Agent

4-12-2010  
Date

If signing on behalf of an entity:

Lori Zuccola  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (8/05)