2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2008 8:00 am
Secretary of State
02-06-2008 90031 012 ***150.00

DOCUMENT # P04000083545

1. Entity Name
CHERRY POCKET FISH CAMP, INC

Principal Place of Business	Mailing Address
3100 CANAL RD #34 LAKE WALES, FL 33853	3100 CANAL RD #34 LAKE WALES, FL 33853

01072008 Chg-P CR2E034 (12/06)

2. Principal Place of Business (No P.O. Box)
Suite, Apt. # etc.
City & State
Zip / Country

3. Mailing Address
Suite, Apt. # etc.
City & State
Zip / Country

4. FEI Number
20-1206734
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ETEN, RICHARD A
3100 CANAL RD #34
LAKE WALES, FL 33853

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 _____

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D ETEN, RICHARD A 3100 CANAL RD #34 LAKE WALES, FL 33853	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	same Richard A ETEN SR. same ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D ETEN, ELSIE 3100 CANAL RD #34 LAKE WALES, FL 33853	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information indicated 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 asterisk, with all other like empowered.

SIGNATURE: Richard A Eten Sr. 2-3-08 863-514-6236
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number