

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000089681

FILED
Apr 07, 2009
Secretary of State

Entity Name: CAMCO OF LAKE CITY, INC.

Current Principal Place of Business:

265 SW MALONE STREET
SUITE 107&109
LAKE CITY, FL 32025

New Principal Place of Business:

1137 W U.S. HWY 90
LAKE CITY, FL 32055

Current Mailing Address:

265 SW MALONE STREET
SUITE 107&109
LAKE CITY, FL 32025

New Mailing Address:

1137 W U.S. HWY 90
LAKE CITY, FL 32055

FEI Number: 20-5177352

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NORRIS, JOHN E
253 NW MAIN BLVD.
LAKE CITY, FL 32055 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P, D () Delete
Name: NYSEN, CARLA
Address: 191 SW FANTASY GLEN
City-St-Zip: LAKE CITY, FL 32024

Title: VPSD () Delete
Name: TOWNSEND, PAM
Address: 782 EMERALD LAKE DRIVE
City-St-Zip: LAKE CITY, FL 32055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAMELA D. TOWNSEND

VPSD

04/07/2009

Electronic Signature of Signing Officer or Director

Date