

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2008 8:00 am
Secretary of State

02-06-2008 90025 013 ***150.00

DOCUMENT # P93000023932 1. Entity Name CAMP WINAPE, INC.					
Principal Place of Business 36 SEA MARSH RD. FERNANDINA BEACH, FL 32034-5045 US				Mailing Address 36 SEA MARSH RD. FERNANDINA BEACH, FL 32034-5045 US	
2. Principal Place of Business - No P.O. Box # 3305 Atlantic Blvd		3. Mailing Address 3305 Atlantic Blvd.			
Suite, Apt. #, etc. Suite B		Suite, Apt. #, etc. Suite B			
City & State Jacksonville, FL		City & State Jacksonville FL			
Zip 32207	Country USA	Zip 32207	Country USA		
4. FEI Number 59-3176073				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KOLAR, RONALD E 36 SEA MARSH RD. FERNANDINA BEACH, FL 32034-5045				7. Name and Address of New Registered Agent Name ERIC S. KOLAR Street Address (P.O. Box Number is Not Acceptable) 3305 Atlantic Blvd. Suite B City Jacksonville FL Zip Code 32207	
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: ERIC S. KOLAR DATE: 1/20/08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00,		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KOLAR, RONALD E <input checked="" type="checkbox"/> Delete 36 SEA MARSH RD FERNANDINA BCH, FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD KOLAR, ERIC S <input type="checkbox"/> Delete 36 SEA MARSH RD FERNANDINA BCH, FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD KOLAR, ALAN E <input type="checkbox"/> Delete 36 SEA MARSH RD FERNANDINA BCH, FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KOLAR, JANET H <input checked="" type="checkbox"/> Delete 36 SEA MARSH RD. FERNANDINA BEACH, FL 32034		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: ERIC S. KOLAR, SECRETARY 1/20/08 0009 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					