2005 FOR PROFIT CORPORATION

FILED Feb 19, 2005 08:00 AM Secretary of State

ANNUAL REPORT							
DOCUMENT # P9300 1. Entity Name WAYWARD HUNT CAMP, INC.							
Principal Place of Business	Mailing Address						
756 BEACHLAND BOULEVARD VERO BEACH, FL 32963	756 BEACHLAND BOÜLEVÂRD Vero Beach, Fl. 32963						
	and the second s						



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

No Chg-P CR2E034 (10/03) Applied For 4. FEI Number 65-0480637 Not Applicable

5. Certificate of Status Desired

02162005

\$8.75 Additional Fee Required

COLLINS, GEORGE G JR DO NOT WRITE 756 BEACHLAND BOULEVARD VERO BEACH, FL 32963 IN THIS SPACE

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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.	Signature, typed or printed name of registered agent and title	if applicable (NOTE Registered	Agent signature	required when reinstating)	DATE	
FILE NOWILL FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.		cing	\$5.00 May Be Added to Fees			
10.	OPFICERS AND DIREC	TORS			A STATE OF THE STA	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BROWN, CALVIN B 756 BEACHLAND BLVD. VERO BEACH, FL		<u></u> :	· -	Unnanggooge	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST COLLINS, GEORGE G JR. 756 BEACHLAND BLVD. VERO BCH., FL				_02/19/05-80025-007 158.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOWNEY, GREGOR 756 BEACHLAND BLVD. VERO BCH., FL	-		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LAPORTE, BOBBY 756 BEACHLAND BLVD. VERO BCH., FL			IN .	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEALL, GEORGE 756 BEACHLAND BLVD. VERO BCH., FL	, =		The second secon		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<u></u>			
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I nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR