

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Aug 06 1996 8:00 am
Secretary of State

DOCUMENT # P94000021495 (4)

1. Corporation Name

CAM DEVELOPMENT CORPORATION

Principal Place of Business

Mailing Address

1850 MANOR LANE
MARATHON FL 33050
US

P O BOX 500084
MARATHON FL 33050
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

03/16/1994

3a. Date of Last Report

05/30/1995

4. FEI Number

65-0481652

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

MCGRAW, EDWARD G
1850 MANOR LANE
MARATHON FL 33050

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed in one of the registered agent and the registered agent

(NOTE: Registered Agent's signature required when re-appointing)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE PD
NAME MCGRAW, EDWARD G
STREET ADDRESS 1850 MANOR LANE
CITY-ST-ZIP MARATHON FL

☐ DELETE

TITLE VD
NAME CAMPBELL, CRAIG L JR
STREET ADDRESS 1850 MANOR LANE
CITY-ST-ZIP MARATHON FL

☐ DELETE

TITLE ST
NAME CAMPBELL, PAMELA T
STREET ADDRESS 1850 MANOR LANE
CITY-ST-ZIP MARATHON FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE VD
12 NAME COTNER, DONALD R.
13 STREET ADDRESS 4594 O.S. HWY.
14 CITY-ST-ZIP MARATHON FL

☐ Change ☒ Addition

21 TITLE VD
22 NAME LEASURE, GARY E
23 STREET ADDRESS 479 79 ST
24 CITY-ST-ZIP MARATHON FL

☐ Change ☒ Addition

31 TITLE ST
32 NAME MCGRAW, EDWARD G.
33 STREET ADDRESS 1850 MANOR LANE
34 CITY-ST-ZIP MARATHON FL

☐ Change ☒ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edward G. McGraw

7/31/96

743 7010

CR2E034 (3/96)