FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

FILED Jan 21 1998 8:00am Sandra B. Mortham Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS

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DOCU	MENT # P95000	0020577 (9))		
	RONTIER CAMPFIRES, INC.	• •			
					## ##################### #############
1 "	ce of Business	Mailing Address	1	I I I I I I I I I I I I I I I I I I I	
19 DONGALLA COURT 19 DONGALLA COURT JACKSONVILLE FL 32211 JACKSONVILLE FL 3221		•			
BAOKSONVIL	LL 1-2 32211	DACKSONVILLE PL 3221	:	DO NOT WRITE IN TH	IS SPACE
l				3. Date Incorporated or Qualified	
				03/13/1995	
2. Principal Place of Business		2a. Mailing Address	i i	4. FEI Number	Applied For
		Suite, Apt. #, etc.		59-3302868	Not Applicable \$8.75 Additional
[27	; ÷	5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25 Name and Address of Current	29 t Bagistered Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Registers	Yes No
W	OODLIEF, MITCHEL E	t togustorou Agotti	81 Name	10, terms and Addices of Itali Hedisland	A Agont
OOS CUUDOU STORES				(D.O. Day Niyaharia Nat Assaulahia)	C MAI
JACKSONVILLE FL 32202			82) Street Addi	ress (P.O. Box Number is Not Acceptable)	
			83		
}			84 City	1	85 Zip Code
				<u> </u>	L
11. Pursuant office or :	to the provisions of Sections 607.0502 registered agent, or both, in the State :	2 and 607.1508, Florida Statu of Florida. Such change was	tes, the above-named corp authorized by the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered ppointment as registered
agent. I a	am familiar with, and accept the obliga	tions of, Section 607.0505, Fl	orida Statutes.		
SIGNATURE	Signature, typed or printed name of registered ager	st and title if applicable. (NO)	E. Registered Agant signature requi	red when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	VP	DELETE	1.1 TITLE		Change Addition
NAME	HOUSEMAN, ANDREW J		1.2 NAME		Š
STREET ADDRESS	9761 BRADLEY ROAD JACKSONVILLE FL		1.3 STREET ADDRESS		\ <u>i</u>
CITY-ST-ZIP TITLE	ST ST	I DELETE	1.4 CITY-ST-ZIP		Change Addition
NAME	HOUSEMAN, ROSE V		2.2 NAME		C oligitõe T vigitigu
STREET ADDRESS	9761 BRADLEY ROAD		2,3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		2.4 CITY-ST-ZIP		
TITLE	Р	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	HOUSEMAN, ANDREW A		3.2 NAME		
STREET ADDRESS	9761 BRADLEY ROAD		3.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		3.4 CITY-ST-ZIP		Observe T Address
TITLE	BRANCH, TERRY J	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS	1948 LORRIE LYNN LANE		4. 2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		4.4 CITY-ST-ZIP		
TITLE	D	DELETE	5.1 TITLE		Change Addition
NAME	DANDRIDGE, CONNIE D		5.2 NAME		
STREET ADDRESS	1665 EAST ROAD		5.3 STREET ADDRESS		-
CITY-ST-ZIP	JACKSONVILLE FL 32216		5.4 CITY-ST-ZIP		P. 1 100 2 100 100 100 100 100 100 100 100
TRTLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADORESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. I hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.