

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Aug 26 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P95000066272 (2)  
1. Corporation Name

CNB CAMIRE, INC.



Principal Place of Business

2459 SW 27TH AVENUE  
OCALA FL 34474  
US

Mailing Address

2459 SW 27TH AVENUE  
OCALA FL 34474  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/25/1995

4. FEI Number

59-3336404

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

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

CAMIRE, NELSON P JR.  
829 N.E. 12TH AVENUE  
OCALA FL 34470

81 Name

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

83

84 City

FL

85

Zip Code

10. Name and Address of New Registered Agent

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 name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME CAMIRE, NELSON P JR.  
STREET ADDRESS 829 N.E. 12TH AVENUE  
CITY-ST-ZIP Ocala FL 34470

TITLE D ☐ DELETE

NAME CAMIRE, JILL C  
STREET ADDRESS 829 N.E. 12TH AVENUE  
CITY-ST-ZIP Ocala FL 34470

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

000002625 150  
-08/26/98--01026--018  
\*\*\*150.00

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.

SIGNATURE: CAMIRE, NELSON P JR. CAMIRE JR. 13527629-277

CR2E034 (5/98)

(2)

8/10/98

To Whom It MAY CONCERN.

IN Regards to the FL. CORP. File Fee I would like to let you know that we didn't receive the original 1st Notice and would like some consideration on the \$400.00 late fee. This is our 3rd year in business and we have paid all of our taxes, Both state and federal in a timely manner. If we would have received the original Notice it would have been paid properly. We are a single family small business employing 8 persons, beside my wife and I, and we certainly can't afford to pay such large late fees, therefore we watch that closely. Enclosed is a check for the original amount of \$150.00, we will await your response and consideration of this matter. We aren't a large corporation with big amounts of capital on hand and appreciate you doing what's fair based on the previous information.

Nelson P. CAMIRE JR

N. C.

WK 352 629-3221

HM 352 622-7021