

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000036737

FILED
Feb 03, 2005
Secretary of State

Entity Name: THE WAKEBOARD CAMP, INC.

Current Principal Place of Business:

848 OSCEOLA
CLERMONT, FL 34711 US

New Principal Place of Business:

Current Mailing Address:

848 W. OSCEOLA
CLERMONT, FL 34711 US

New Mailing Address:

FEI Number: 59-3374287

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARKS, PJ
224 ORANGE AVE
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARKS, PJ
Address: 224 ORANGE AVE
City-St-Zip: ORLANDO, FL 34711

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MARKS, PJ
Address: 224 ORANGE AVE
City-St-Zip: ORLANDO, FL 34711 US

Title: VP () Change (X) Addition
Name: SCHMIDT, KYLE R
Address: 1259 FRAN MAR CT
City-St-Zip: CLERMONT, FL 34711 US

Title: TRES () Change (X) Addition
Name: COTTAM, JESSICA
Address: 15900 LAKE ORIENTA CT
City-St-Zip: CLERMONT, FL 34711 US

Title: SEC () Change (X) Addition
Name: BENJAMIN, GREENWOOD
Address: 1270 FRAN MAR CT
City-St-Zip: CLERMONT, FL 34711 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PJ MARKS

PRES

02/03/2005

Electronic Signature of Signing Officer or Director

_____ Date