## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED DOCUMENT # P98000064019** Jan 18, 2008 08:00 AM 1. Entity Name **Secretary of State** LONE CABBAGE FISH CAMP, INC. Mailing Address Principal Place of Business 1076 FAIRLAWN DR. 1076 FAIRLAWN DR. ROCKLEDGE, FL 32955 ROCKLEDGE, FL 32955 CR2E034 (11/05) 01142008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 59-3527561 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE EARLEY, NORMAN G 1076 FAIRLAWN DR. ROCKLEDGE, FL 32955 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) <u> HAAAAAAAA</u> 01/18/08-88043-002 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TILE NAME EARLEY, NORMAN G STREET ADDRESS 1076 FAIRLAWN DR. ROCKLEDGE, FL 32955 CITY-ST-ZIP TITLE EARLEY, CARRIE L NAME STREET ADDRESS 1076 FARILAWN DR ROCKLEDGE, FL 32955 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-7IF TIBLE NAME STREET ACCRESS CITY-ST-ZIP TILE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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: X

NAME STREET ADDRESS

arrie Earley

1/14/08

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