

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J58096

Entity Name: PARRAMORE'S CAMP, INC.

Current Principal Place of Business:

1675 CAMP SOUTH MOON RD.
ASTOR, FL 32102

Current Mailing Address:

P.O. BOX 39
ASTOR, FL 32102

FEI Number: 59-2781877

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PIERCE, LORI E
1675 CAMP SOUTH MOON RD.
ASTOR, FL 32102 US

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

Officer/Director Detail :

Title P, VP
Name PIERCE, LORI E
Address 1747 CAMP SOUTH MOON RD.
City-State-Zip: ASTOR FL 32102

Title S,T
Name WELLER, REVA L
Address 1747 CAMP SOUTH MOON RD
City-State-Zip: ASTOR FL 32102

I hereby 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 all other like empowered.

SIGNATURE: LORI PIERCE

PRESIDENT

03/21/2014

Electronic Signature of Signing Officer/Director Detail

Date