

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J58096

**FILED**  
**Feb 25, 2018**  
**Secretary of State**  
**CC0873250966**

**Entity Name:** PARRAMORE'S CAMP, INC.

**Current Principal Place of Business:**

301 CLIFFWOOD DRIVE  
NEWPORT, TN 37821

**Current Mailing Address:**

301 CLIFFWOOD DRIVE  
NEWPORT, TN 37821 US

**FEI Number:** 59-2781877

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WOOD, WILLIAM J  
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:** WILLIAM JAMES WOOD

02/25/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P, VP  
Name PIERCE, LORI E  
Address 301 CLIFFWOOD DR.  
City-State-Zip: NEWPORT TN 37821

Title S, T  
Name WELLER, REVA L  
Address 388 WALNUT ST  
City-State-Zip: NEWPORT TN 37821

*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**

02/25/2018

Electronic Signature of Signing Officer/Director Detail

Date