

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708408

FILED
Apr 27, 2006
Secretary of State

Entity Name: SOUTHERN MENNONITE CAMP ASSOCIATION, INC.

Current Principal Place of Business:

25458 DAN BROWN HILL RD.
BROOKSVILLE, FL 34602

New Principal Place of Business:

Current Mailing Address:

25458 DAN BROWN HILL RD.
BROOKSVILLE, FL 34602

New Mailing Address:

FEI Number: 59-1288067 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, STEPHEN J
25458 DAN BROWN HILL ROAD
BROOKSVILLE, FL 34602 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SCHROCK, AMMON
Address: PO BOX 20759
City-St-Zip: SARASOTA, FL 34276

Title: D () Delete
Name: BAUMAN, SPENCE
Address: 291 PINE RANCH TRAIL
City-St-Zip: OSPREY, FL 34229

Title: DS () Delete
Name: WITTMER, BETH
Address: 1963 RACIMO DRIVE
City-St-Zip: SARASOTA, FL 34240

Title: DV () Delete
Name: SHEARER, HAROLD
Address: 3901 BAHAI BISTA ST. LOT 441
City-St-Zip: SARASOTA, FL 34232

Title: DC () Delete
Name: WISE, ARTHUR
Address: 5520 ANTOINETTE ST.
City-St-Zip: SARASOTA, FL 34234

Title: DT () Delete
Name: MILLER, GENE
Address: 5108 LORRAINE RD.
City-St-Zip: BRADENTON, FL 342029200

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change () Addition
Name: GOCKLEY, VERNA
Address: 3151 53RD ST
City-St-Zip: SARASOTA, FL 34234

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN J. WILSON

DIR

04/27/2006

Electronic Signature of Signing Officer or Director

Date