

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748130

FILED
Mar 15, 2008
Secretary of State

Entity Name: CAMPTOWN ASSOCIATION OF 99 YEAR LEASEHOLDERS, INC.

Current Principal Place of Business:

5152 BOGGY CREEK RD
E 16
ST CLOUD, FL 34771

New Principal Place of Business:

Current Mailing Address:

5152 BOGGY CREEK RD
E 16
ST CLOUD, FL 34771

New Mailing Address:

FEI Number: 59-2400930 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HAMILTON, THOMAS L
5152 BOGGY CREEK RD.
E-16
ST CLOUD, FL 34771 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: DT () Delete
Name: RUMSEY, AUGUSTA
Address: 5040 DISSTON DR
City-St-Zip: SAINT CLOUD, FL 34771

Title: DS () Delete
Name: KLINGELHULTZ, KAY
Address: 5152 A20 BOGGY CREEK RD
City-St-Zip: ST. CLOUD, FL

Title: DP () Delete
Name: HAMILTON, THOMAS L
Address: 5152 E16 BOGGY CREEK RD.
City-St-Zip: ST. CLOUD, FL

Title: D () Delete
Name: BARFIELD, ONA
Address: 5152 A-39BOGGY CREEK RD
City-St-Zip: ST. CLOUD, FL 34771

Title: D () Delete
Name: FOX, JERRY
Address: 5152 G-4 BOGGY CREEK RD
City-St-Zip: ST CLOUD, FL 34771

Title: D () Delete
Name: DE MARS, RUTH
Address: 5152 A-40 BOGGY CREEK RD
City-St-Zip: ST CLOUD, FL 34771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: DVP (X) Change () Addition
Name: LEONARD, THOMAS
Address: 5152 BOGGY CREEK RD
City-St-Zip: SAINT CLOUD, FL 34771

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 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: THOMAS HAMILTON

PRES

03/15/2008

Electronic Signature of Signing Officer or Director

Date