

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N03260

1. Entity Name

CAMP HAPPY SANDS, INC.

Principal Place of Business

Mailing Address

468 WOODBINE DR.
PENSACOLA FL 32503-3238
US

468 WOODBINE DR.
PENSACOLA FL 32503-3238
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Escambia

Zip

Country

Escambia

4. FEI Number

59-2388390

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROOSE, ILA F.
468 WOODBINE DRIVE
PENSACOLA FL 32503

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PST	☐ Delete
NAME	ROOSE, ILA F.	
STREET ADDRESS	468 WOODBINE DRIVE	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	D	☐ Delete
NAME	ROOSE, ILA F.	
STREET ADDRESS	468 WOODBINE DRIVE	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	MD	☐ Delete
NAME	SMITH, JAN	
STREET ADDRESS	468 WOODBINE DRIVE	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	MD	☐ Delete
NAME	ROOSE, CHARLES E.	
STREET ADDRESS	468 WOODBINE DR.	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	VP	☐ Delete
NAME	ROOSE, CHARLES E. (JR.)	
STREET ADDRESS	3500 NEWTON DR.	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	ST	☐ Delete
NAME	ROOSE, BRENDA	
STREET ADDRESS	3500 NEWTON DR.	
CITY-ST-ZIP	PENSACOLA FL	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Food and Clothing chair.	☒ Change ☐ Addition
NAME	Judy Wu	
STREET ADDRESS	3960 Potosi	
CITY-ST-ZIP	Pensacola, Fl. 32504	☐ Change ☐ Addition
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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:

Janet P. Roose Executive Director 1-26-2000-

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

-850-433-367

FILED
Jan 29, 2000 8:00 am
Secretary of State

01-29-2000 90140 045 ****61.25



DO NOT WRITE IN THIS SPACE