

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 19, 2006 8:00 am**  
**Secretary of State**

06-19-2006 90001 009 \*\*\*\*70.00

**DOCUMENT # 710501**

1. Entity Name  
SEACAMP ASSOCIATION, INC.



Principal Place of Business  
1300 BIG PINE AVE  
BIG PINE KEY, FL 33043 US

Mailing Address  
1300 BIG PINE AVENUE  
BUSINESS OFFICE  
BIG PINE KEY, FL 33043-3336 US



2. Principal Place of Business

3. Mailing Address

04072006 Chg-NP CR2E037 (11/05)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number  
59-1144011

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

HOOPER, IRENE  
1300 BIG PINE AVE  
BIG PINE KEY, FL 33043

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME HOOPER, IRENE  
STREET ADDRESS 1300 BIG PINE AVE  
CITY-ST-ZIP BIG PINE KEY, FL

TITLE D ☐ Delete  
NAME CARRIER, JEFF  
STREET ADDRESS ALBION COLLEGE, 611 E PORTER STREET  
CITY-ST-ZIP ALBION, MI 49224

TITLE D ☐ Delete  
NAME WEEKS, CLARK  
STREET ADDRESS 3530 ASHFORD DUNWOODY RD #188  
CITY-ST-ZIP ATLANTA, GA 30319

TITLE D ☐ Delete  
NAME JOHNSON, BARRETT  
STREET ADDRESS POST OFFICE BOX 1308  
CITY-ST-ZIP TALLAHASSEE, FL 32302

TITLE D ☐ Delete  
NAME DUNAN, JANE  
STREET ADDRESS 91-1140 ELEA ST.  
CITY-ST-ZIP WAIMEA, HI 96796

TITLE D ☐ Delete  
NAME UPSHAW, GRACE  
STREET ADDRESS 1300 BIG PINE AVENUE  
CITY-ST-ZIP BIG PINE KEY, FL 33043

TITLE VLD ☐ Change ☒ Addition  
NAME Betty Brothus  
STREET ADDRESS 1735 Bayview Dr.  
CITY-ST-ZIP Little Torch Key, FL 33042

TITLE T/S/D ☐ Change ☐ Addition  
NAME Allan Milledge  
STREET ADDRESS 3240 Corporate Way  
CITY-ST-ZIP Miramar, FL 33025

TITLE D ☐ Change ☐ Addition  
NAME Doug Harris  
STREET ADDRESS 218 Fairchild DR.  
CITY-ST-ZIP Highlands Ranch, CO 80126

TITLE D ☐ Change ☐ Addition  
NAME Robert Beech  
STREET ADDRESS 9938 Zig Zag Rd.  
CITY-ST-ZIP Cincinnati, OH 45242

TITLE D ☐ Change ☐ Addition  
NAME Don Mitchell  
STREET ADDRESS 525 Melrose Ave.  
CITY-ST-ZIP Winter Park, FL 32789

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/06 (305) 872-2331

Date

Daytime Phone #