


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2008 08:00 A
Secretary of State

DOCUMENT # 710501 1. Entity Name SEACAMP ASSOCIATION, INC.	
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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
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DO NOT WRITE IN THIS SPACE



01232008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-1144011	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HOOPER, IRENE 1300 BIG PINE AVE BIG PINE KEY, FL 33043	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when re-issuing) DATE _____

Filing Fee Is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000881996 04/16/09-80023-003 70.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HOOPER, IRENE 1300 BIG PINE AVE BIG PINE KEY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MILLEDGE, ALLAN 3240 CORPORATE WAY MIRAMAR, MI 33025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEEKS, CLARK 3530 ASHFORD DUNWOODY RD #188 ATLANTA, GA 30319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, BARRETT POST OFFICE BOX 1308 TALLAHASSEE, FL 32302
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS BROTHERS, BETTY 1735 BAYVIEW DRIVE LITTLE TORCH KEY, FL 33042
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D UPSHAW, GRACE 1300 BIG PINE AVENUE BIG PINE KEY, FL 33043

DO NOT WRITE IN THIS SPACE

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: Irene Hooper **3/26/08** **305/872-2331**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #