

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720380

FILED
Apr 21, 2011
Secretary of State

Entity Name: FLORIDA STATE ASSOCIATION OF NATIONAL CAMPERS AND HIKERS ASSOCIATION, INC.

Current Principal Place of Business:

304 KENTUCKY AVE
SAINT CLOUD, FL 34769 US

New Principal Place of Business:

Current Mailing Address:

304 KENTUCKY AVE
SAINT CLOUD, FL 34769 US

New Mailing Address:

FEI Number: 23-7164499

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, PETER G
304 KENTUCKY AVE
SAINT CLOUD, FL 34769 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: TD
Name: BROWN, PETER G
Address: 304 KENTUCKY AVE
City-St-Zip: SAINT CLOUD, FL 34769

Title: SD
Name: BROWN, JANE
Address: 304 KENTUCKY AVE
City-St-Zip: ST. CLOUD, FL 34769

Title: PD
Name: PRESTON, LARRY
Address: 7120 DAVIN ST.
City-St-Zip: LAKE LAND, FL 33813

I hereby 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 all other like empowered.

SIGNATURE: PETER G. BROWN

TD

04/21/2011

Electronic Signature of Signing Officer or Director

Date