

FILE NOW: FILING FEE IS \$61.25

**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 14, 1999 8:00 am
Secretary of State

04-14-1999 90206 025 ****70.00

DOCUMENT # 729851

1. Corporation Name

COMMUNITY CAMPING COUNCIL, INC.

Principal Place of Business

330 5TH ST. NO.
ST. PETERSBURG FL 33701
US

Mailing Address

330 5TH ST. N.
ST. PETERSBURG FL 33701
US



2. Principal Place of Business

21 655 Second Avenue South

Suite, Apt. #, etc.

22 City & State

23 St. Petersburg, FL

Zip Country

24 33701 25 Pinellas

2a. Mailing Address

26 655 Second Avenue South

Suite, Apt. #, etc.

27 City & State

28 St. Petersburg, FL

Zip Country

29 33701 30 Pinellas

3. Date Incorporated or Qualified

06/05/1974

4. FEI Number

23-7432179

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional Fee Required

6. Election Campaign Financing ☐ Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

POPE, (ROBERT W.)
2037 1ST AVE N
ST. PETERSBURG FL 33713

10. Name and Address of New Registered Agent

81 Name

Judith Humbert

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

6301 23rd Terrace North

83 City & State

St. Petersburg, FL 33720

84 City

St. Petersburg

FL

85 Zip Code 33710

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

4/5/99

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SD
WELLINGTON, LINDA
5800 19TH AVE N
ST PETERSBURG FL

☐ DELETE

TD
MARVIN, SALLY
6245 25 AVE N
ST. PETERSBURG FL

☐ DELETE

PD
CORKEY, JAY MS.
2226 39TH AVE N
ST. PETERSBURG FL

☐ DELETE

VD
WOOSTER, MARIE
326 10TH AVE. NE
ST PETERSBURG FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PD

1.2 NAME

Marie Wooster

1.3 STREET ADDRESS

326 10th Avenue NE

1.4 CITY-ST-ZIP

St. Petersburg, FL 33701

☒ Change☐ Addition

2.1 TITLE

VD

2.2 NAME

Thelma Footman

2.3 STREET ADDRESS

2234 18th Street South

2.4 CITY-ST-ZIP

St. Petersburg, FL 33712

☐ Change☒ Addition

3.1 TITLE

TSD

3.2 NAME

Linda Wellington

3.3 STREET ADDRESS

5800 19th Avenue North

3.4 CITY-ST-ZIP

St. Petersburg, FL 33710

☒ Change☐ Addition

4.1 TITLE

D

4.2 NAME

Roslyn Graham-Haynes

4.3 STREET ADDRESS

1000 62nd Place South

4.4 CITY-ST-ZIP

St. Petersburg, FL 33705

☐ Change☒ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/99

Date

894-4803

Daytime Phone #

0052249

CR2E037 (1/98)