

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746152

FILED  
Apr 28, 2006  
Secretary of State

**Entity Name:** KIRBY-SMITH CAMP, SONS OF THE CONFEDERACY, INC.

**Current Principal Place of Business:**

C/O MICHAEL W. FISHER  
ONE INDEPENDENT DRIVE, SUITE 2600  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

C/O MICHAEL W. FISHER  
ONE INDEPENDENT DRIVE, SUITE 2600  
JACKSONVILLE, FL 32202

**New Mailing Address:**

**FEI Number:** 59-3040804

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FISHER, MICHAEL W  
ONE INDEPENDENT DRIVE  
SUITE 2600  
JACKSONVILLE, FL 32202 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: C ( ) Delete  
Name: MAY, MIKE  
Address: 1443 BELVEDERE AVENUE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete  
Name: CLARK, JOE SR  
Address: 4919 PRINCE EDWARD RD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: T ( ) Delete  
Name: BREWSTER, C E  
Address: 2970 ST. JOHNS AVE 8-C  
City-St-Zip: JACKSONVILLE, FL 32205

Title: D ( ) Delete  
Name: MORGAN, HARRIS  
Address: 909 ARLINGTON AVENUE  
City-St-Zip: JACKSONVILLE, FL 32211

Title: D ( ) Delete  
Name: BULLARD, RAY  
Address: 4705 WADHAM LANE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete  
Name: FISHER, MICHAEL W  
Address: ONE INDEPENDENT DR., 2600  
City-St-Zip: JACKSONVILLE, FL 32202

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: WISNER, JERRY  
Address: 1767 MAYVIEW ROAD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D (X) Change ( ) Addition  
Name: SCOTT, RANDY  
Address: 8453 LYNDIA SUE LANE W  
City-St-Zip: JACKSONVILLE, FL 32217

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MIKE MAY

C

04/28/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date