

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748283

FILED
Apr 12, 2009
Secretary of State

Entity Name: BLUFF SPRINGS CAMPGROUNDS, INCORPORATED

Current Principal Place of Business:

1300 LIAHONA TRAIL
MCDAVID, FL 32568 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 4654
MILTON, FL 32570 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HENDERSON, DON
5288 GOSHAWK DR
MILTON, FL 32570 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: VP () Delete
Name: BUNTZ, VIOLA
Address: 2028 POLLARD RD
City-St-Zip: HONORAVILLE, AL 36042

Title: P (X) Delete
Name: BLAKE, ROBERT
Address: 9535 INDIAN BLUFF RESORT LANE
City-St-Zip: YOUNGSTOWN, FL 32466

Title: T () Delete
Name: HENDERSON, DON
Address: 5288 GOSHAWK DR
City-St-Zip: MILTON, FL 32570

Title: SD () Delete
Name: WILSON, STANCIL
Address: 1153 NAVCO ROAD
City-St-Zip: MOBILE, AL 36605

Title: D () Delete
Name: VEAZEY, STEVEN
Address: 1001 W WALNUT
City-St-Zip: INDEPENDENCE, MO 640503562

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: RICHARD, JENKINS
Address: 4250 TROUT AVE
City-St-Zip: MILTON, FL 32583

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

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

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 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: DON HENDERSON

T

04/12/2009

Electronic Signature of Signing Officer or Director

Date