2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766711

FILED Mar 18, 2004 Secretary of State

Entity Name: LAND O' SUNSHINE CAMP CHERITH, INC.

Current Principal Place of Business: New Principal Place of Business: 17001 SHADY PINES DR. LUTZ, FL 33549 **Current Mailing Address: New Mailing Address:** 3880 GADSEN RD 3880 GADSDEN RD. JACKSONVILLE, FL 32207 JACKSONVILLE, FL 32207 FEI Number: 59-2258535 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HINES, JAMES P. 315 HÝDE PARK AVE. TAMPA, FL 33606 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition THOMPSON, EDWARD Name: Name: Address: 3880 GADSEN RD. Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: KOCH, KAREN Name: Address: 15920 MARSHFIELD DR Address: City-St-Zip: TAMPA, FL 33624 City-St-Zip: Title: () Delete Title: (X) Change () Addition HOUCHEN, DONNA Name: MASTRONICOLA, ARTHUR Name: 16013 CHASTAIN ROAD 12626 WILLOUGHBY LANE Address: Address: City-St-Zip: ODESSA, FL 33556 City-St-Zip: JACKSONVILLE, FL 32225 Title: SD () Delete Title: SD (X) Change () Addition KROTZER, SHELLEY Name: Name: HOUCHEN, DONNA 16013 CHASTAIN ROAD Address: 4619 35 COURT EAST Address: City-St-Zip: BRADENTON, FL 34203 City-St-Zip: ODESSA, FL 33556

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EDWARD L THOMPSON TD 03/18/2004