

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766711

FILED
Apr 05, 2009
Secretary of State

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

Current Principal Place of Business:

17001 SHADY PINES DR.
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

1307 PUP FISH LN
DELAND, FL 32724

New Mailing Address:

FEI Number: 59-2258535

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HINES, JAMES P.
315 HYDE PARK AVE.
TAMPA, FL 33606 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: M () Delete
Name: HACQUEBORD, JOAN
Address: 4802 WYNWOOD DRIVE
City-St-Zip: TAMPA, FL 33615

Title: PD () Delete
Name: COLLIS, JANICE
Address: 11649 92ND ST. N
City-St-Zip: LARGO, FL 33773

Title: D () Delete
Name: FENBY, JANE
Address: 17001 SHADY PINES DR
City-St-Zip: LUTZ, FL 33549

Title: M () Delete
Name: HULL, ROBIN
Address: 1307 PUP FISH
City-St-Zip: DELAND, FL 32724

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: VAN HORN, MELINDA
Address: 13346 MORAN DR
City-St-Zip: TAMPA, FL 33618

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: ROBIN HULL

M

04/05/2009

Electronic Signature of Signing Officer or Director

Date