

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001056

FILED
Mar 27, 2007
Secretary of State

Entity Name: EPISCOPAL CAMPS & CONFERENCE CENTERS, INC.

Current Principal Place of Business:

11057 CAMP WEED PLACE
LIVE OAK, FL 32060

New Principal Place of Business:

Current Mailing Address:

11057 CAMP WEED PLACE
LIVE OAK, FL 32060

New Mailing Address:

FEI Number: 54-1562242

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HATCH, JOHN D ESQ
1267 BERKSHIRE LANE SUITE 200
TARPON SPRINGS, FL 34688 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: CP () Delete
Name: MCQUEEN, PAUL
Address: 1601 ALAFAYA TRAIL
City-St-Zip: OVIEDO, FL 32765

Title: VST () Delete
Name: ESHELMAN, TOM
Address: PO BOX 654
City-St-Zip: VALLE CRUCIS, NC 28691

Title: D () Delete
Name: KRISLOCK, EVITA
Address: 245 E 13TH AVE
City-St-Zip: SPOKANE, WA 99202

Title: D () Delete
Name: MILLER, RUFUS
Address: 2020 N TATNALL STREET
City-St-Zip: WILMINGTON, DE 19802

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: MILLER, RUFUS
Address: 2020 N TATNALL STREET
City-St-Zip: WILMINGTON, DE 19802

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

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

Title: D (X) Change () Addition
Name: GREEN, TIM
Address: 4411 LAKE ROAD
City-St-Zip: CONNEAUT, OH 44030

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: RUFUS MILLER

CP

03/27/2007

Electronic Signature of Signing Officer or Director

Date