

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007117

FILED  
Jan 23, 2012  
Secretary of State

**Entity Name:** ASSOCIATION OF CAMPS FARTHEST OUT, INC.

**Current Principal Place of Business:**

317 SOUTH MADISON AVENUE  
WATKINS GLEN, NY 148911120 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1254  
OGDENSBURG, NY 13669 US

**New Mailing Address:**

**FEI Number:** 41-0788319

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COHN, ALAN B ESQ.  
100 W CYPRESS CREEK ROAD, SUITE 700  
FT LAUDERDALE, FL 33309 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: MRS  
Name: BROWN, KARYN TREAS  
Address: 1730 INDIAN WAY  
City-St-Zip: CUMMING, GA 30040 US

Title: MS  
Name: SMALT, RUTH CHAIR  
Address: 46 OAKWOOD AVE  
City-St-Zip: RYE, NY 10580 US

Title: MRS  
Name: BARBARA, COOPER V-CHAIR  
Address: PO BOX 84  
City-St-Zip: HARRISBURG, NE 69345 US

Title: MS  
Name: SMALT, ROBIN SECR  
Address: 313 WILEY ST  
City-St-Zip: MADISON, TN 37115 US

Title: MRS  
Name: PIATT, JENNIFER DIR  
Address: 623 CAROLINE ST  
City-St-Zip: OGDENSBURG, NY 13669

I hereby 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 all other like empowered.

SIGNATURE: JENNIFER K PIATT

DIR

01/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date