2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004799

FILED Jan 26, 2006 Secretary of State

Entity Name: FLORIDA ASSOCIATION OF RV PARKS & CAMPGROUNDS SCHOLARSHIP COMMITTEE, INC.

Current Principal Place of Business: New Principal Place of Business: 1340 VICKERS RD. TALLAHASSEE, FL 323033041 US **Current Mailing Address: New Mailing Address:** 1340 VICKERS RD. TALLAHASSEE, FL 323033041 US FEI Number: 59-1503847 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: CORNWELL, ROBERT A 1340 VICKERS ROAD TALLAHASSEE, FL 32303 US 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: (X) Change () Addition () Delete CORNWELL, ROBERT A CORNWELL, ROBERT A Name: Name: 1340 VICKERS RD Address: 1340 VICKERS RD Address: City-St-Zip: TALLAHASSEE, FL 323033041 US City-St-Zip: TALLAHASSEE, FL 323033041 US Title: Title: () Delete () Change () Addition USINA, FRANK Name: Name: Address: 4125 COASTAL HWY Address: City-St-Zip: ST AUGUSTINE, FL 32095 US City-St-Zip: Title: () Delete Title: () Change () Addition PARHURST, JOHN Name: Name: Address: 28229 CR 33 Address: City-St-Zip: LEESBURG, FL 34748 US City-St-Zip: Title: 0 () Delete Title: () Change () Addition Name: SHIRLEY, NITA Name: Address: 3745 N. ST. RD. 29 SW Address: City-St-Zip: LABELLE, FL 33935 US City-St-Zip: Title: () Delete Title: () Change (X) Addition MARCHAND, MARLENE Name: Name: 12425 UNION ROAD Address: Address: City-St-Zip: City-St-Zip: NAPLES, FL 34114 US Title: () Delete Title: () Change (X) Addition PHELPS, LYNDA Name: Name: Address: Address: 17021 UPRIVER DRIVE N. FT. MYERS, FL 33917 City-St-Zip: City-St-Zip:

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: ROBERT CORNWELL O 01/26/2006