

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008
Secretary of State

DOCUMENT# N02000009390

Entity Name: CHURCH OF GOD CAMPGROUND, INC

Current Principal Place of Business:

8020 CHASE ROAD
LAKELAND, FL 33810

New Principal Place of Business:

Current Mailing Address:

2080 PAIGE AVE
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

FEI Number: 54-2085145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWEN, LARRY B
630 HIDDEN PINES BLVD
NEW SMYRNA, FL 32168 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: P () Delete
Name: OWEN, LARRY B
Address: 630 HIDDEN PINES BLVD.
City-St-Zip: NEW SMYRAN BEACH, FL 32168

Title: VP/T () Delete
Name: OWEN, BRYANT
Address: 51 WEDGEFIELD DRIVE
City-St-Zip: ASHEVILLE, NC 28806

Title: SEC () Delete
Name: CORNWELL, ROLAND
Address: 158 HAGA LOOP
City-St-Zip: SOMERVILLE, AL 35670

Title: T () Delete
Name: TANNER, JOHN
Address: 53 ANDERSON STREET
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: T () Delete
Name: JONES, TROY
Address: 2321 11TH STREET SOUTH
City-St-Zip: ST. PETERSBURG, FL 33705

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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: LARRY OWEN

P

01/11/2008

Electronic Signature of Signing Officer or Director

Date