

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001626

FILED
May 04, 2005
Secretary of State

Entity Name: HOLINESS YOUTH CAMP, INC.

Current Principal Place of Business:

1328 EAST 8TH AVENUE
MOUNT DORA, FL 32757

New Principal Place of Business:

Current Mailing Address:

1328 EAST 8TH AVENUE
MOUNT DORA, FL 32757

New Mailing Address:

FEI Number: 02-0684519 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WILSON, MICHAEL
1328 EAST 8TH AVENUE
MOUNT DORA, FL 32757 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:

Title: DIR () Delete
Name: WILSON, MICHAEL
Address: 1328 EAST 8TH AVENUE
City-St-Zip: MOUNT DORA, FL 32757

Title: DIR () Delete
Name: WILSON, TAMMY
Address: 1328 EAST 8TH AVENUE
City-St-Zip: MOUNT DORA, FL 32757

Title: DIR () Delete
Name: CRAWLEY, JEFFERY
Address: 1328 EAST 8TH AVENUE
City-St-Zip: MOUNT DORA, FL 32757

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
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 for the exemption stated in Section 119.07(3)(i), 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: MICHAEL B. WILSON

DIR

05/04/2005

Electronic Signature of Signing Officer or Director

Date