2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006
Secretary of State

DOCUMENT# N03000008797

Entity Name: CAMPSITE MINISTRIES, INC.

Current Principal Place of Business:

10351 HUDSON AVENUE
HUDSON, FL 34669

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5587
HUDSON, FL 34674

New Mailing Address:

FEI Number: 23-7378219 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAYERS, JAMES
10351 HUDSON AVENUE
HUDSON, FL 34669 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:	D	( ) Delete
Name:	SAYERS, JAMES	
Address:	10351 HUDSON AVENUE	
City-St-Zip:	HUDSON, FL 34669	
Title:	D	( ) Delete
Name:	SELLERS, RON	
Address:	644 EAST SNOWS LAKE ROAD	
City-St-Zip:	FENWICK, MI 48834	
Title:	D	( ) Delete
Name:	WILLIS, RAYMOND H	
Address:	1410 MARINER BOULEVARD	
City-St-Zip:	SPRING HILL, FL 34609	
Title:	D	( ) Delete
Name:	MUMMAU, CLAIR	
Address:	1311 SHCWANGER ROAD	
City-St-Zip:	MOUNT JOY, PA 17552	
Title:	D	( ) Delete
Name:	HIGBIE, DAVE	
Address:	17044 FALCON DRIVE, NE	
City-St-Zip:	SAND LAKE, MI 49343	
Title:	D	( ) Delete
Name:	MILLER, LONNIE	
Address:	6650 SAN MARCO DRIVE	
City-St-Zip:	PORT RICHEY, FL 34668	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	LONG, JACK DR.	
Address:	11133 EAGLE BEND DR	
City-St-Zip:	HUDSON, FL 34667	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	DANLEY, WES	
Address:	4530 LANTERN CT N.W.	
City-St-Zip:	COMSTOCK PARK, MI 49321	
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 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: JAMES SAYERS D 04/10/2006

Electronic Signature of Signing Officer or Director — Date