

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003908

FILED  
Jun 04, 2009  
Secretary of State

Entity Name: CAMP MERCY CORPORATION

## Current Principal Place of Business:

3133 E NEW PROVIDENCE RD  
LANTANA, FL 33462

## New Principal Place of Business:

## Current Mailing Address:

3133 E NEW PROVIDENCE RD  
LANTANA, FL 33462

## New Mailing Address:

FEI Number: 20-1040211      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:

VAILLANCOURT, JAMES A  
3133 E NEW PROVIDENCE RD  
LANTANA, FL 33462      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: P      ( ) Delete  
Name: VAILLANCOURT, JAMES A  
Address: 3133 E NEW PROVIDENCE RD  
City-St-Zip: LANTANA, FL 33462

Title: V      ( ) Delete  
Name: HENRY, PHILIP J  
Address: 4015 DORADO DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: S      ( ) Delete  
Name: LA LIME, ROBERT C  
Address: 2792 DONNELLY DR  
City-St-Zip: LANTANA, FL 33462

Title: T      ( ) Delete  
Name: HAIR, JAMES  
Address: 2485 GUILFORD WAY  
City-St-Zip: WELLINGTON, FL 33414

Title: D      ( ) Delete  
Name: JAMNER, JAUCQUES P  
Address: 15851 SICILY TERRACE  
City-St-Zip: WELLINGTON, FL 33414

## 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:

Title: T      (X) Change ( ) Addition  
Name: WEEKS, LELAND E III  
Address: P.O. BOX 312  
City-St-Zip: MONTGOMERY, VT 05071

Title: D      (X) Change ( ) Addition  
Name: HURLEY, ROBIN  
Address: ABACO ST  
City-St-Zip: PALM SPRINGS, FL 33461

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: JAMES A. VAILLANCOURT

P

06/04/2009

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

\_\_\_\_\_  
Date