

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007465

FILED
May 01, 2009
Secretary of State

Entity Name: CAMP ON THE ROCK, INC.

Current Principal Place of Business:

96 EDWARD DRIVE
PALM COAST, FL 32164

New Principal Place of Business:

Current Mailing Address:

96 EDWARD DRIVE
PALM COAST, FL 32164

New Mailing Address:

FEI Number: 41-2145718 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:

SHONER, BARBARA
96 EDWARD DRIVE
PALM COAST, FL 32164 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: PT () Delete
Name: SHONER, BARBARA
Address: 96 EDWARD DRIVE
City-St-Zip: PALM COAST, FL 32164

Title: V () Delete
Name: KAMIENIECKI, LORI
Address: 19743 ABRAHMS
City-St-Zip: CLINTON TWP, MI 48035

Title: S () Delete
Name: SCOTT, KRYSTAL
Address: 2860 GATEWAY PARK LN
City-St-Zip: LEXINGTON, KY 40511

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 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: BARBARA J SHONER

PRES

05/01/2009

Electronic Signature of Signing Officer or Director

Date