

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011277

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: 2ND FLORIDA CAVALRY CAMP, INC.

## Current Principal Place of Business:

2222 W. UNIVERSITY AVENUE  
GAINESVILLE, FL 32603

## New Principal Place of Business:

## Current Mailing Address:

15215 N.W. 58TH AVENUE  
ALACHUA, FL 32615

## New Mailing Address:

FEI Number: 20-3784848

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BROWN, MICHAEL E SR.  
15215 N.W. 58TH AVENUE  
ALACHUA, FL 32615 US

## Name and Address of New Registered Agent:

BURCH, ERNEST W JR.  
2222 W. UNIVERSITY AVENUE  
GAINESVILLE, FL 32603 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: ERNEST W. BURCH, JR.

04/28/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BURCH, LESTER W  
Address: 1111 S.W. WACAHOOTA ROAD  
City-St-Zip: MICANOPY, FL 32667

Title: V ( ) Delete  
Name: NORTON, JAMES W  
Address: 8501 S.W. 52ND PLACE  
City-St-Zip: GAINESVILLE, FL 32608

Title: ST ( ) Delete  
Name: BROWN, MICHAEL E SR.  
Address: 15215 N.W. 58TH AVENUE  
City-St-Zip: ALACHUA, FL 32615

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BURCH, ERNEST W JR.  
Address: 2222 W. UNIVERSITY AVENUE  
City-St-Zip: GAINESVILLE, FL 32603

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: MICHAEL E. BROWN, SR.

ST

04/28/2009

Electronic Signature of Signing Officer or Director

Date